DOCUMENT RESUME

ED 232 968 SP 022 677

TITLE	Health Education Curriculum Objectives and Family Life Content Outline, K-12.
INSTITUTION	Northern Valley Regional High School District, Closter, N.J.
PUB DATE	83
NOTE	111p.
AVAILABLE FROM	Office of Curriculum and Instruction, Northern Valley Schools, 162 Knickerbocker Rd., P. O. Box 270, Demarest, NJ 07627 ($12.75).
PUB TYPE	Guides - Classroom Use - Guides (For Teachers) (052)
EDRS PRICE	MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS	Contraception; Curriculum Design; Drug Use; *Educational Objectives; Elementary Secondary Education; *Family Life Education; *Health Education; Mental Health; Parenthood Education; Physical Health; Safety Education; *Sex Education; Social Responsibility

ABSTRACT

This health education curriculum guide consists of two major sections: a list of health education objectives and a family life education content outlire. Each section is subdivided by grade levels, kindergarten through 12. Health education objectives for each grade level are organized into six topic areas: mental health, physical health, community health, safe living, substance abuse, and family life. The family life course includes information on human reproduction, social values relating to sexuality, and responsible citizenship and parenting. (JD)

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HEALTH EDUCATION CURRICULUM OBJECTIVES

AND

FAMILY LIFE EDUCATION CONTENT OUTLINE

K - 12

1983

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EDWARD A. CICCORICCO, Ed. D., DIRECTOR

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APPROVAL LIST

HEALTH EDUCATION CURRICULUM OBJECTIVES

and

FAMILY LIFE EDUCATION CONTENT OUTLINE

K-12

1983

	Recommended
Health Education Curriculum Committee	X
Instructional Council	X
Principals Advisory Group	X
Northern Valley Administrators Association	X
Board of Education:	Approved
Closter	X
Demarest	X
Harrington Park	X
Haworth	X
Northvale	X
Norwood	X
Old Tappan	X
Northern Valley Regional High School District	X

NOTE: The Family Life Education objectives and content outline were reviewed and endorsed by the Regional Community Advisory Committee on Family Life Education.

REGIONAL COMMUNITY ADVISORY COMMITTEE
ON FAMILY LIFE EDUCATION

May 19, 1982

ENDORSEMENT OF PROPOSED CURRICULUM FOR FAMILY LIFE EDUCATION

We, the Regional Community Advisory Committee on Family Life Education, have carefully reviewed and discussed the proposed objectives and content outline for family life education, Kindergarten through Grade Twelve, in the Northern Valley Schools.

We unanimously recommend and support the implementation of the program in our schools.

This committee was keenly aware of the sensitivity of the content to be covered by this program in relation to individual values.

We recognize the valuable contribution of the professional staff in developing this program and presenting it to the committee.

Dr. A. Milton Arky
Mr. Robert Baier*
Dr. Charles Blackinton
Mrs. Judy Cauda
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PREFACE

The purpose of this guide is to provide for a sequential and articulated health education program both within and among the schools of the Northern Valley.

The professional staff has identified common student performance expectations which have been stated as instructional objectives. These objectives have been organized into six topical areas for each grade level, K-12: mental health, physical health, community health, safe living, substance abuse, and family life. A content outline for family life education has been provided for additional clarification.

This guide responds to State "Thorough and Efficient" requirements in that it provides a sound and firm basis for district level and program level objectives directly related to the educational goals adopted by school districts in the Northern Valley region. The guide is particularly related to the following "T & E" educational outcome goals:

Practice and understand the ideas of health and safety.
Understand and practice the skills of family living.
Develop good character, self-respect, and self-discipline.
Develop feeling of self-worth.
Learn how to examine and use information to solve problems and make decisions.
Develop an understanding of and a sensitivity to all people.
Learn to respect and get along with people with whom we work and live.
Develop an appreciation for the environment and learn how to use its natural resources wisely.
Gain information needed to make job selections.

The guide also provides the basis for systematic program evaluation.

This guide meets the State requirements for family life education programs in terms of both content and the development and review process. The following chronology of regional activities reflects the process of program development:

October 1980 - May 1981: Health Education Curriculum Committee of teacher representatives from the eight school districts is organized, meets, and develops a health education curriculum including objectives relating to mental health, physical health, community health, safe living, and substance abuse. Committee awaits State guidelines for family life education curriculum.

January 1981: Joint Committee of Northern Valley School Boards holds meeting at which Dr. William Burcat of the State Education Department discusses the State Code on Family Life Education.

Spring 1981: State guidelines are published.

Fall 1981: School boards in the region adopt a family life education policy.

Fall 1981: Utilizing State guidelines, the Health Education Curriculum Committee develops K-12 objectives for the family life education component of the health education curriculum.

Winter 1981-82: A content outline based on the developed objectives is prepared by consultant, Dr. Carole Donovan, Assistant Professor of Education, Kean College.

Spring 1982: Content outline is reviewed by Dr. Donovan with Health Education Curriculum Committee.

Spring 1982: Regional Community Advisory Committee on Family Life Education, composed of 29 members including community representatives, parents, high school students, clergy, physicians, and professional staff, is organized, meets, studies, and unanimously endorses regional family life education curriculum guide.

Summer 1982: Dr. Donovan and Dr. Ciccoricco incorporate suggestions and recommendations made by the Regional Community Advisory Committee on Family Life Education.

Fall 1982: Health Education Curriculum Guide (including family life education objectives and content outline) receives final review by Curriculum Committee and is submitted to the Instructional Council, Principals Advisory Group, and Northern Valley Administrators Association. Each of these groups unanimously recommends the guide.

December 1982: Guide is submitted to the eight local school boards for their review.

January 1983: Guide is described to board members and administrators at a meeting co-sponsored by the Joint Committee of Northern Valley School Boards and the Northern Valley Administrators Association. The guide is made available to community residents for their review.

March 1983: School boards take action on proposed guide.

1983-84 School Year: Implementation of Health Education/Family Life Education Curriculum.

This guide could not have been produced without the combined efforts of many individuals. The Health Education Curriculum Committee worked diligently to achieve consensus on the objectives of the curriculum. Dr. Carole Donovan, consultant for this project, conscientiously prepared a thorough and accurate content outline based upon the Committee's proposed objectives.

The Regional Community Advisory Committee on Family Life Education, while representing a variety of perspectives, thoughtfully, sensitively, and objectively reviewed the proposed curriculum and offered a number of constructive suggestions which have been incorporated in this guide.

A note of appreciation is extended to all of the teachers in the eight districts who contributed their suggestions, to the Instructional Council for its advice regarding this curriculum, to the Principals Advisory Group and the Northern Valley Administrators Association for their cooperation in this project and to the eight boards of education for their support which makes possible curriculum articulation projects such as this one.

Acknowledgement with appreciation is made for the competent assistance given by Mrs. Ann Bischoff, Secretary, who typed this guide utilizing a microcomputer, a word processing program, and a printer.

Edward A. Ciccoricco

Edward A. Ciccoricco
Director of Curriculum and Instruction

HEALTH EDUCATION CURRICULUM COMMITTEE

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Chairperson: Dr. Edward A. Ciccoricco, Director of Curriculum and Instruction, Northern Valley Schools

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INTRODUCTION

This health education curriculum guide consists of two major sections: a list of health education objectives and a family life education content outline. Each section is subdivided by grade levels, kindergarten through twelve.

The health education objectives for each grade level are organized into six topical areas: mental health, physical health, community health, safe living, substance abuse, and family life. The objectives were selected in terms of the "average" student in the Northern Valley. Some students will need additional instruction to meet the expectations indicated for the particular levels. Some modification of the expectations may be necessary for certain students. For other students, the objectives will be seen as a base upon which enrichment experiences can be developed.

Both the health education objectives and the family life education content outline were developed with special attention to the developmental needs of the students and the accuracy of the information included, as well as sensitivity to community needs, interests, and feelings.

This guide can be helpful in the selection of instructional materials. It is not tied to any one particular textbook series or instructional materials "package." The regional Curriculum Library may be utilized as one source of resource materials for this program.

It is expected that teacher inservice education opportunities will be provided to support this program. Approaches to program evaluation need to be explored and developed cooperatively among schools in the region.

It is planned that this guide will be reviewed and evaluated periodically. Suggestions for revisions are invited.

HEALTH

EDUCATION

CURRICULUM

OBJECTIVES

I. KINDERGARTEN

A. Mental Health

1. Discuss their own unique qualities.
2. Adapt to the social and physical environments of the school.

B. Physical Health

1. Care for self (for example, tying shoes, dressing themselves, buttoning and zipping when necessary, and removing or adding clothing when weather indicates).
2. Practice habits of personal cleanliness (for example, washing hands, using toilet properly, using tissue for colds).
3. Recognize the relationship of food and water to growth and development.
4. Identify external body parts.
5. Tell the job of the five senses.
6. Demonstrate proper method of dental hygiene.

C. Community Health

1. Recognize the existence of community helpers (for example, school nurse, fireperson).
2. Recognize their own responsibility for controlling litter and noise pollution.

D. Safe Living

1. State name, address and phone number.
2. Explain how to travel to and from school in a safe manner.
3. Identify potential safety hazards and recognize their own role in accident prevention.
4. Recognize the need for help in case of injury or illness.
5. Describe how to obtain help in an emergency.
6. Recognize difference between accepting help from community helpers and "strangers."

I. KINDERGARTEN (continued)

E. Substance Abuse

1. Give examples showing that medicines used properly can be helpful.
2. State that medicines should be used under supervision and direction.
3. Recognize that medicines and household chemicals can be dangerous.

F. Family Life

1. Recognize that people have different kinds and sizes of families.
2. Describe family relationships and responsibilities.
3. Recognize that children differ in sex, size, strength, and growth.

II. GRADE 1

A. Mental Health

1. Discuss ways emotions are expressed (for example, fear, happiness, sadness, anger).
2. Listen to others to learn how they feel.
3. Get along with members of their peer group (for example, sharing, fair play, making friends).
4. Practice respect for the rights and property of others.

B. Physical Health

1. Demonstrate a sense of responsibility about keeping their bodies clean.
2. Relate good health to a balance of activity, rest, sleep and diet.
3. Describe negative health effects of excessive television viewing.

B. Physical Health (continued)

4. Recognize that protection and care of the mouth, teeth and gums promote oral health as well as general health and appearance.

5. State the importance of a periodic physical and dental examination as a good practice in preventing illness.

C. Community Health

1. Identify ways of preventing the spread of illness.

2. Recognize that advertising affects what people buy, therefore affecting their health.

3. Identify people especially trained to keep them healthy (for example, doctors, nurses, dentists, pharmacists, teachers).

D. Safe Living

1. Explain how to travel to and from school in a safe manner. (Reinforcement)

2. Identify safety hazards in play activities.

3. Describe safety practices when traveling in a motor vehicle.

4. Demonstrate simple first aid procedures for self (for example, cuts, nose bleed).

5. Recognize the need for help in case of injury or illness -- and how to obtain help. (Reinforcement)

E. Substance Abuse

1. Recognize that many substances can be beneficial when used properly and harmful when abused.

2. Recognize poison labels.

F. Family Life

1. Recognize how a happy home life depends upon the contributions of each family member.

II. GRADE 1 (continued)

F. Family Life (continued)

2. Demonstrate responsibility for their actions and feelings.

3. Recognize that people grow, change, reproduce, and die.

4. Differentiate the potentially harmful strangers from those who can help.

III. GRADE 2

A. Mental Health

1. Recognize that emotions affect behavior.

2. Recognize their own similarities and their differences and accept those characteristics that cannot be changed.

3. Explain reasons for their own importance to school and family.

4. Recognize that it is wise to discuss a problem with an adult.

B. Physical Health

1. Dress appropriately to the activity and weather.

2. Recognize that good nutrition is related to life-long health.

3. Identify the basic food groups necessary for an adequate breakfast, lunch and dinner.

4. Recognize that they perceive their world through their senses.

5. State three basic functions of teeth: chewing, speech, and appearance.

C. Community Health

1. Give examples of how to conserve resources, such as water, school supplies, electricity, heat.

C. Community Health (continued)

2. Identify ways their community helps to safeguard people.

D. Safe Living

1. Recognize the potential dangers of pesticides.
2. Explain safe practices in relation to cycling, sledding, skating, and skateboards.
3. Observe safety precautions around animals.
4. State what to do if clothing catches fire.
5. Explain safety procedures for a class trip.
6. State the purpose of first aid (including its limits).

E. Substance Abuse

1. Recognize that a medicine which is helpful for one person could be harmful to another.
2. Identify common household substances and differentiate between proper use and misuse.

F. Family Life

1. Recognize that the family is a social unit organized to provide and foster love and respect among its members.
2. Recognize what child abuse/neglect is and what can be done about it.
3. Recognize that living things produce their own kind.
4. Recognize that each family has its own special rules.
5. Explain how growing up involves more responsibility.

IV. GRADE 3

A. Mental Health

1. Offer friendship and assistance to a newcomer in the classroom.

2. Recognize the different ways people may express emotions, such as words, facial expressions, and actions.

3. Give examples of socially acceptable ways to express feelings.

B. Physical Health

1. Describe the function of bones and muscles.

2. Demonstrate proper posture.

3. Locate the following body organs and describe their general function:

   a. brain
   b. lungs
   c. heart
   d. stomach.

4. Distinguish between primary and permanent teeth.

5. Describe proper brushing and flossing of the teeth.

6. Identify foods which promote tooth decay.

C. Community Health

1. Identify sources of pollution.

2. Describe health implications of pollution.

3. Suggest possible solutions to pollution.

4. Describe the role of the dental specialists in the maintenance of dental health and the prevention of dental problems.

5. Recognize that advertising tries to influence what we buy and may not describe possible harmful effects of the products.

D. Safe Living

1. Demonstrate proper behavior during a fire drill.
2. List potertial safety hazards in the home.
3. Recognize that most accidents can be prevented.
4. Recognize the need to use electrical equipment safely.
5. State safety measures to follow during an electrical storm.
6. Describe safe practices when in or around water.
7. Describe first aid procedure for small cuts and wounds.
8. Identify contents of a basic first aid kit and their use.

E. Substance Abuse

1. Recognize that tea, coffee, colas, and chocolate are some foods which can be harmful to the body when overused.
2. Describe harmful effects of tobacco on the body.
3. Identify alcohol as a drug-like substance.
4. Name beverages which contain alcohol.
5. Describe how alcohol causes changes in the body (for example, causing the brain to mix up messages from the senses).

F. Family Life

1. Recognize that the single most important function of the family is to help each of its members cope with the many events in the life of that family.
2. Recognize that friendly attitudes, sharing and the use of appropriate language and manners are essential parts of responsible behavior.
3. Recognize that living things, including humans, produce their own kind.

IV. GRADE 3 (continued)

F. Family Life (continued)

4. Recognize the effects of environment and heredity on growth.

V. GRADE 4

A. Mental Health

1. Describe ways of demonstrating consideration for others.
2. Accept individual differences.
3. Accept responsibility for own behavior.

B. Physical Health

1. Identify the different kinds of teeth and their functions.
2. Describe the functions of the skin.
3. Explain how the five main senses help us.
4. List the four basic food groups. (Reinforcement)
5. Identify the six nutrients.
6. Give examples of foods that contain the different nutrients.
7. Recognize differences in human growth patterns.
8. Explain the purpose of the digestive system.
9. Name the parts of the digestive system.
10. Compare nutritious snacks and "junk" foods.

C. Community Health

1. Describe the role of the local health department.
2. Describe the role of the local health department in reducing various kinds of pollution.

C. Community Health (continued)

3. Name several specialists in the health field.

4. Describe the work of several health specialists:

   a. pediatrician
   b. psychologist
   c. public health officer
   d. health education teacher.

5. Read a label to find out information about a product.

6. Explain the purpose of immunization.

7. List diseases which are prevented by immunization procedures.

D. Safe Living

1. List rules for pedestrian safety.

2. Describe plan for emergency evacuation of home in the event of fire.

3. Give examples of safe practices in play and sports activities.

E. Substance Abuse

1. Explain why cigarette advertising is not permitted on television.

2. Recognize the potential dangers in misuse of "over-the-counter" drugs.

3. Recognize the differences between the use and abuse of alcohol and between social drinking and alcoholism.

F. Family Life

1. Recognize the need for tolerance toward the differences in the behavior of other family members.

2. Give examples of effective patterns of communication within the family.

3. Describe the cell as the basic unit of living matter.

V. GRADE 4 (continued)

F. Family Life (continued)

4. Recognize that cells divide and grow to form body mass.

5. Identify primary and secondary sex characteristics of males and females.

VI. GRADE 5

A. Mental Health

1. Relate the benefits of leisure activities to mental health.

2. Indicate the potential conflicts between individual and group values (for example, regarding substance abuse).

3. Identify causes of stress.

4. Suggest productive ways of coping with stressful situations.

B. Physical Health

Explain the purpose and the parts of the following body systems:

a. digestive (Reinforcement)
b. muscular-skeletal (Reinforcement)
c. respiratory
d. circulatory
e. nervous
f. excretory
g. endocrine
h. reproductive.

C. Community Health

Identify medical specialists who deal with the systems of the body (indicated above).

VI. GRADE 5 (continued)

D. Safe Living

1. Describe first aid procedure for:

   a. burns
   b. bleeding
   c. choking
   d. interrupted breathing.

2. List rules for bicycle safety. (Reinforcement)

E. Substance Abuse

1. Define alcoholism as an illness causing personal and social problems.

2. Identify several commonly abused substances and the consequences of their abuse: marijuana, PCP (angel dust), heroin, cocaine, amphetamines and barbiturates.

F. Family Life

1. Recognize the need to cope with changes in the nature or structure of the family.

2. Identify the reproductive systems.

3. Describe the effects of the endocrine system on the reproductive system and emotions.

4. Describe menstruation.

5. Define the meaning of nocturnal emission.

VII. GRADE 6

A. Mental Health

1. Recognize some of the characteristics of people with good mental health.

2. Identify some environmental conditions that play a part in the mental health of an individual.

VII. GRADE 6 (continued)

B. Physical Health

1. Recognize some of the growth and development patterns of adolescence.

2. Identify the characteristics of physical health and physical fitness.

3. Recognize that physical fitness varies for different individuals.

4. Plan a balanced nutritional diet as it pertains to individual needs (for example, overweight, underweight, medical problems).

C. Community Health

1. Name several important health heroes and their contributions.

2. Describe current community health problems and how they relate to everyday living (for example, water pollution, air pollution).

3. Identify several current information sources on community health problems (for example, newspapers, newscasts, public library).

D. Safe Living

1. Explain the importance of knowing and following safety practices while participating in recreational activities.

2. Describe safe practices when using public transportation.

3. Explain safe practices relating to the evacuation of public buildings.

E. Substance Abuse

1. Explain the difference between prescription and "over-the-counter" drugs.

2. Describe the differences between the use and abuse of drugs, including alcohol and tobacco.

VII. GRADE 6 (continued)

F. Family Life

1. Describe the interconnected cooperative roles of the various members of the family.

2. Recognize the presence of conflict in the family and give examples of ways of resolving family conflicts.

3. Describe the anatomy and physiology of the reproductive system.

4. Recognize that responsible personal behavior is important to peer relationships.

VIII. GRADE 7

A. Mental Health

1. Identify factors which influence human personality.

2. Recognize that individuals can experience extremes of emotions at different times.

3. Recognize that individuals have varying degrees of strengths and weaknesses (such as physical and intellectual abilities and handicaps).

B. Physical Health

1. List the three current major causes of death in the United States.

2. Explain some contributing factors for the major causes of death in the United States.

3. Recognize the particular importance of personal hygiene as it relates to adolescence.

C. Community Health

1. Identify at least three organizations dedicated to solving health problems.

2. Describe health services offered by at least three health organizations.

3. Describe current national health problems.

VIII. GRADE 7 (continued)

D. Safe Living

Describe basic first aid procedures for:

a. poisoning
b. dislocations and broken bones
c. insect bites
d. shock
e. burns (Reinforcement)
f. bleeding (Reinforcement)
g. choking (Reinforcement)
h. interrupted breathing. (Reinforcement)

E. Substance Abuse

1. Describe effects of substance abuse on the human body.

2. Recognize the pressures that exist in society that influence the use or abuse of drugs, including alcohol and tobacco.

F. Family Life

1. Identify physical and emotional health factors important to family living.

2. Identify community resources for resolving family conflict.

3. Recognize social problems that occur during puberty.

4. Explain anatomy and physiology of human reproduction. (Reinforcement)

5. Describe how sexuality is exploited through pornography, advertising, movies, and television.

6. Recognize what child abuse, sexual assault, molestation, and incest are and what the victim can do about it.

IX. GRADE 8

A. Mental Health

1. Recognize that different people have different reactions to the same situation, all of which may be acceptable.

IX. GRADE 8 (continued)

A. Mental Health (continued)

2. Respect the human dignity of each individual, regardless of differing points of view.

B. Physical Health

1. List several advances in modern medicine.

2. Describe ways of dealing with personal health concerns.

3. Recognize ways of identifying "health quackery."

C. Community Health

1. Identify at least five health or health-related careers.

2. Describe the educational requirements of at least five health and/or health related careers.

3. Describe current world health problems.

D. Safe Living

1. Describe safety practices in and around water. (Reinforcement)

2. List rules for bicycle safety. (Reinforcement)

3. Explain ways of coping with natural disasters such as earthquakes, floods and hurricanes.

E. Substance Abuse

1. Name broad categories of drugs.

2. Give examples of broad categories of drugs.

3. Indicate physical and psychological effects of different drugs.

4. Describe the legal aspects relating to drugs (for example, controls and penalties).

5. Describe several consequences of drug abuse on the community (for example, crime, welfare costs, birth defects).

IX. GRADE 8 (continued)

F. Family Life

1. Describe family patterns in the United States.
2. Identify characteristics of emotional maturity.
3. Recognize the effects of peer pressure.
4. Accept sexuality as a healthy aspect of the total personality.
5. Explain the purpose and process of dating.
6. Recognize the importance of developing standards for responsible sexual behavior.
7. Explain the process of fertilization and pregnancy.
8. Identify common sexually transmitted diseases, their prevention, and their control.

X. GRADE 9

A. Mental Health

1. Describe characteristics of an emotionally healthy person.
2. Recognize that differences in cultural, ethnic and religious backgrounds exist.
3. Identify two resources available to assist us with mental health problems.

B. Physical Health

1. Explain the functions and parts of the body systems. (Reinforcement)
2. Plan a balanced nutritional diet as it pertains to individual needs.
3. Demonstrate a knowledge of diseases as related to the body systems (heart disease, cancer, etc.).

C. Community Health

1. State various health agencies and their services to the community.

2. Describe ways in which young people may help their community (for example, hospital service, firefighting, ambulance corps service, helping the elderly).

3. Explain the methods for prevention of communicable diseases.

4. List some environmental factors that have an effect on the health of the community (water, air, etc.).

D. Safe Living

Practice the safe procedures related to bus and fire drill safety.

E. Substance Abuse

1. Explain the short and long term effects of substance abuse.

2. Recognize the pressures that exist from the media that influence the use or abuse of drugs, including alcohol and tobacco.

3. Recognize the influences that peer pressure has on the use and abuse of drugs, including alcohol and tobacco.

F. Family Life

1. Identify forces that affect emotions.

2. Accept sexuality as a healthy aspect of the total personality.

3. Recognize the importance of expressing feelings in social relationships with others.

4. Explain the influence of heredity and environment upon human growth and development.

5. Explain male and female reproductive systems.

6. Describe signs and symptoms of pregnancy.

7. Describe process of conception and pregnancy.

8. Recognize the importance of sound prenatal care for the prospective mother.

9. Identify the purposes and methods of family planning.

10. Describe common sexually transmitted diseases, their prevention and their control.

XI. GRADE 10

A. Mental Health

1. Analyze the effects of the emotions on driving performance.

2. Indicate a positive attitude toward the laws that govern safe driving.

B. Physical Health

Recognize the importance of being physically fit for driving (sight, hearing, etc.).

C. Community Health

1. Explain the environmental effects of the motor vehicle.

2. Recognize that different states have different driving laws.

3. Describe the functions of local and state agencies that pertain to motor vehicle operation.

4. Identify alternative means of transportation.

D. Safe Living

1. Recognize that ownership of a motor vehicle entails responsibilities, including cost of the automobile, repair and maintenance, insurance and license fees.

2. State the importance of the New Jersey Division of Motor Vehicles regulations pertaining to motor vehicles (license, registration, inspection).

XI. GRADE 10 (continued)

E. Substance Abuse

Give examples of ways in which alcohol and drugs can effect operation of a motor vehicle.

XII. GRADE 11

A. Mental Health

List the potential dangers of daily living and show the appropriate measures that would produce a healthful and safe environment.

B. Physical Health

1. Demonstrate a knowledge of first aid as it pertains to the physical well being of the individual.

2. Recognize the body's responses to specific injuries, illnesses, and accidents.

C. Community Health

1. List the agencies that are available for emergency assistance and the method of contacting them.

2. Explain the ways of coping with natural (disasters such as earthquakes, floods and hurricanes) and describe their impact on the community.

D. Safe Living

1. Describe standard first aid procedures for:

a. poisoning (Reinforcement)
b. dislocations and broken bones (Reinforcement)
c. insect bites (Reinforcement)
d. shock (Reinforcement)
e. burns (Reinforcement)
f. bleeding (Reinforcement)
g. choking (Reinforcement)
h. interrupted breathing (Reinforcement)
i. sudden illness.

XII. GRADE 11 (continued)

E. Substance Abuse

Explain the first aid procedures for the drug overdose victim.

F. Family Life

1. Recognize responsibilities in relation to sexual development.
2. Recognize that there are myths and misconceptions about human sexuality.
3. Explain the structure and function of male and female reproductive systems. (Reinforcement)
4. Identify various ways of sexual expression.
5. Explain various methods of family planning.
6. Describe common sexually transmitted diseases, their prevention and their control. (Reinforcement)

XIII. GRADE 12

A. Mental Health

1. Recognize the different patterns of abnormal behavior.
2. Name the different types of mental and emotional disorders.

B. Physical Health

1. Recognize that work, exercise, rest and nutrition are each a part of total fitness.
2. Indicate the benefits of good food planning and purchasing.
3. State the risks involved in excessive dieting and/or following fad diets (malnutrition and deficiency diseases).

XIII. GRADE 12 (continued)

C. Community Health

1. Identify agencies/facilities in the community that assist you in maintaining physical fitness.

2. Recognize that there are various health-related careers available.

D. Safe Living

(This topical area was intensively covered in grades 10 and 11, in terms of driver education and first aid.)

E. Substance Abuse

Evaluate the social effects of substance abuse including the change in an individual's self-concept and the reaction of family and peers.

F. Family Life

1. Describe the purpose and function of the family in today's society.

2. Identify the responsibilities involved in parenting.

3. Identify factors that affect the family.

4. Recognize the importance of establishing an identity.

5. Describe responsibilities in preparation for marriage.

6. Describe different adult relationships, adjustments and sources of conflict, and crises which may occur.

7. Identify factors to be considered in family planning.

8. Describe various methods of family planning. (Reinforcement)

9. Explain birth process from fertilization through delivery including prenatal and postnatal care.

10. Recognize that there are methods of terminating pregnancy.

11. Recognize the consequences of teenage pregnancy.

F. Family Life (continued)

12. Explain complications resulting from common sexually transmitted diseases. (Reinforcement)

13. Recognize that human sexuality persists from birth to death.

F A M I L Y

L I F E

E D U C A T I O N

C O N T E N T

O U T L I N E

Note: The objectives in this section have been coded for cross-reference to the preceding section. The notation "(3:F:2)" means that the objective is a third grade level objective (3) in the family life section (F) and is number two in that section (2).

KINDERGARTEN

(K:F:1) Recognize that people have different kinds and sizes of families.

1. Families may be large or small with many, few, or no children.

2. They may have all male, all female, or both male and female members.

3. There can be one or more parents, stepparents, stepchildren, adopted children.

4. Extended families can include grandparents and/or other relatives.

5. Some children live with a person other than a parent, like an aunt or close friend.

(K:F:2) Describe family relationships and responsibilities.

1. Family members live together and love each other.

2. Love is shown by sharing and caring in work and play.

3. Parents show their love by working or staying home to meet family needs; providing food, clothing, protection, and affection for family members; and teaching socialization.

4. Children show their love by helping parents around the house; playing with and helping brothers and sisters; being kind, respectful, and cooperative.

(K:F:3) Recognize that children differ in sex, size, strength, and growth.

1. All people are <u>either</u> boys (males) and may become fathers <u>or</u> girls (females) and may become mothers.

2. Each individual is unique because of a combination of different characteristics which include: physical traits; general interests; growth patterns (will vary even at a particular age); and abilities (children excel in different ways).

3. Kindness and thoughtfulness are two of the many characteristics that we should consider in choosing friends.

(1:F:1) Recognize how a happy home life depends upon the contributions of each family member.

1. Not doing your share is unfair to others, causing problems and unhappiness in the family.
2. Family members show they care about each other by assuming responsibilities at home.
3. Happy families work and play together, sharing both good times and bad times.

(1:F:2) Demonstrate responsibility for their actions and feelings.

1. All people (regardless of race, religion, age, ability) have feelings.
2. People have different feelings (happy, sad, angry) at different times.
3. It is important to express feelings.
4. There are acceptable and unacceptable expressive behaviors.
5. Each individual is responsible for his/her own actions.
6. Learning how to deal with feelings is part of growing up.
7. Everybody makes mistakes; we can learn from our mistakes.

(1:F:3) Recognize that people grow, change, reproduce, and die.

1. The life cycle is basically the same for all people.
2. Babies grow, become children and then adults.
3. Growing up involves many changes.
4. When babies grow up, they can become parents (girls/mothers and boys/fathers).
5. Parents become grandparents when their grownup children have a baby.

6. People get older with time, and eventually all people die.

7. An illness or an accident may result in the death of a child or an adult.

(1:F:4) Differentiate the potentially harmful strangers from those who can help.

1. Some people who usually can be counted on to help children are: teachers, nurses, doctors, clergy-persons, dentists, police officers, firefighters, and crossing guards.

2. Most people can be trusted, but some cannot.

3. Never accept anything from, and never go off with, a stranger (unknown person).

4. Ask parents before going anywhere, even with a known person.

5. Parents should always know where their children are.

6. Immediately report to an adult you trust any experience in which you are hurt or touched in a way that worries you, even if there has been a warning not to tell anyone.

GRADE 2

(2:F:1) Recognize that the family is a social unit organized to provide and foster love and respect among its members.

1. Family members care about and help each other.

2. Respect and kindness help members to feel important.

3. Parents help children to grow strong in body and mind.

4. Children show consideration for parents by doing their best at home and in school.

5. Family members show their love for each other by the way they act.

6. Children learn how to live with others in a friendly and sociable way as a result of family life.

(2:F:2) Recognize what child abuse/neglect is and what can be done about it.

1. Child neglect is failure to provide proper care (insufficient food, clothing, medical care, love).

2. Child abuse is mistreatment (unfairly severe scoldings, beatings, and other unpleasant treatment which can result in injury to the body or mind).

3. Grownups who neglect or abuse children need help and so do their children.

4. The problem can often be corrected and should be reported to a doctor, nurse, teacher, clergyperson or other dependable adult.

(2:F:3) Recognize that living things produce their own kind.

1. New plants grow from plant seeds.

2. Birds lay eggs that develop into baby birds.

3. Most animal babies develop from tiny egg cells inside the mother's womb (uterus) until the babies are ready to be born; they leave the mother's body through a special opening called the birth canal (vagina).

(2:F:4) Recognize that each family has its own special rules.

1. Families are different; therefore, each one needs special rules.

2. Some rules are for protection and others are for convenience.

3. Rules that might be the same for most families are: telling your parents where you are at all times and telling them when you are sick or injured.

(2:F:5) Explain how growing up involves more responsibility.

1. As children grow older they are able to do more for themselves and others.

2. Growing up involves increased freedom and independence; freedom can be dangerous if it does not include responsibility.

3. When parents and teachers depend upon and trust children to do certain tasks, they are helping the children to learn independence and to become responsible adults.

GRADE 3

(3:F:1) Recognize that the single most important function of the family is to help each of its members cope with the many events in the life of that family.

1. There are many events in the life of a family; some are happy and others are sad; events can be major or minor.

2. All family members may not react to an event in the same way.

3. Whether occasions are happy or sad, major or minor, family members count on each other for support.

(3:F:2) Recognize that friendly attitudes, sharing and the use of appropriate language and manners are essential parts of responsible personal behavior.

1. Thoughts and feelings are expressed in actions.

2. Positive behavior shows we feel good about ourselves and others.

3. Feelings should be expressed honestly but with respect for others; it is never all right to hurt anyone.

4. Unpleasant feelings may be changed to pleasant feelings by turning your interest to another activity, being helpful, or sharing.

5. Each individual personally controls and is personally responsible for his/her own behavior.

6. It is wise to be friendly, polite and considerate, treating others as you would like to be treated in return.

(3:F:3) Recognize that living things, including humans, produce their own kind.

1. New plants grow from plant seeds. (Review)

2. Birds lay eggs that develop into baby birds. (Review)

3. Most animal babies develop from tiny egg cells inside the mother's body; grow in the mother's womb (uterus) until the babies are ready to be born; and leave the mother's body through a special opening called the birth canal (vagina). (Review)

4. Human babies also develop from tiny egg cells inside the mother's body; grow in the mother's womb (uterus) until the babies are ready to be born; and leave the mother's body through a special opening called the birth canal (vagina).

5. An egg cell does not develop into a baby unless it is joined by a tiny sperm cell from the father.

6. Babies look like their parents because each one is created when an egg cell from his/her mother and a sperm cell from his/her father join.

7. All like creatures are attracted to each other and reproduce; animal parents mate during special seasons and on chance meeting, but human parents choose each other for deeper and more lasting reasons and they marry.

(3:F:4) Recognize the effects of environment and heredity on growth.

1. All living things are influenced by the traits their parents pass on to them, known as heredity.

2. Each egg cell and each sperm cell carry coded messages (in the nucleus) which tell how to make a new human being like the parents.

3. These messages are recorded on thread like bits of matter (chromosomes) which are made up of smaller bits of matter known as genes.

4. Genes are responsible for traits such as skin color, body build, growth rate, and natural abilities; these traits will be similar to those of the parents.

5. All living things also are influenced by the conditions under which they live, known as environment.

6. A balanced diet, rest, exercise, good health, and a happy family life make it possible for growth to full potential.

7. Each person has the power to make the most of his/her inherited traits.

GRADE 4

(4:F:1) Recognize the need for tolerance toward the differences in the behavior of other family members.

1. All people have feelings, but all people do not have the same feelings at the same time.

2. Feelings affect the way we act.

3. Family members are alike but also different in many ways.

4. Understanding other people's feelings makes it easier to deal with their behavior.

5. Family harmony depends upon the mutual tolerance of its members.

(4:F:2) Give examples of effective patterns of communication within the family.

1. Family members who share their ideas and feelings will understand each other better than those who do not.

2. Working, playing, and talking freely together provide opportunities for effective communications.

3. Essential communication skills include: expressing thoughts and feelings easily, listening carefully, and observing body language.

4. Children can communicate with adults by asking them questions.

   a. What did they do when they were the same age?

   b. Where did they live when they were growing up?

   c. What were their friends and families like?

5. Children can communicate with adults by giving them information.

   a. Share news about what was learned at school.

   b. Talk about how family emergencies might be prevented or handled.

   c. Make agreements on what each might do to help the other on a regular basis.

   d. Discuss peer pressures and feelings of insecurity.

6. Adults and children can communicate by nonverbal means, like smiling, hugging, or patting on the back, as well as through art, music, and dance.

(4:F:3) Describe the cell as the basic unit of living matter.

1. The smallest unit of a body part is the cell.

2. Each cell is made of a clear, jellylike substance called protoplasm and surrounded by a covering, or membrane, which allows food and oxygen to move into it and waste products to move out of it.

3. The thick core, or nucleus, contains chromosomes.

4. Cells divide and make new cells like themselves; this is how you grow.

5. The sperm cell and egg cell (ovum) are special single cells that join to form a new cell which then divides and makes more new cells.

(4:F:4) Recognize that cells divide and grow to form body mass.

1. There are many different types of cells; tissues are groups of like cells.

2. The sperm cell unites with the egg cell, divides and forms a cluster; after about 14 days these cells specialize, or arrange into different body tissues, and growth continues.

(4:F:5) Identify primary and secondary sex characteristics of males and females.

1. Sex of a baby is determined by a chromosome in the sperm cell at the moment the ovum is fertilized.

2. Boys and girls have certain physical differences at birth.

   a. A girl has two ovaries, a uterus, and a vagina (internal).

   b. A boy has two testicles and a penis (external).

3. Girls generally begin puberty between the ages of 10-16.

   a. Ovaries produce hormones and ova begin to mature.

   b. Breasts enlarge--sometimes one grows more rapidly than the other.

   c. Hips become rounder and fuller.

   d. Hair grows in the underarms and pubic area.

4. Boys generally begin puberty between the ages of 12-17.

   a. Testicles produce hormones and sperm begin to develop.

   b. Semen, a fluid which carries the sperm, is produced.

   c. Shoulders widen.

   d. Voice changes.

   e. Hair grows in the underarms, pubic area, on the face, and sometimes on the chest.

5. Development during puberty includes emotional changes in boys and girls.

GRADE 5

(5:F:1) Recognize the need to cope with changes in the nature or structure of the family.

1. Many family changes can occur during a lifetime, such as marriage, birth or adoption of a child, divorce or remarriage, serious illness or death of a loved one, job loss or move to a new community.

2. Major changes within the family often create stress among its members.

3. The increasing influence of the peer group may create personal insecurity and family tensions.

4. We deal with change by fighting against it or adjusting to it.

   a. Fighting tends to produce more problems and to increase stress (resulting in anger, depression, and worry).

   b. Adapting, or adjusting, to change is more healthful for the individual and the family; it involves compromise, cooperation, and acceptance.

(5:F:2) Identify the reproductive systems.

1. The reproductive systems contain those organs which work together to produce a baby.

2. The female reproductive system is primarily inside the body and includes:

   a. Ovaries - two oval shaped glands which produce ova and female hormones.

   b. Fallopian tubes - structures through which ova travel from the ovaries to the uterus.

   c. Uterus - pear shaped, muscular organ in which a baby develops.

   d. Vagina - birth canal which leads from the uterus to the outside of the body.

   e. Labia - protective folds of skin which cover the opening to the urethra (where urine leaves the body).

3. The male reproductive system is primarily outside the body and includes:

   a. Penis - organ through which sperm and urine leave the body. (Some males are circumcised and others are not.)

   b. Testicles - two oval shaped glands which produce sperm and male hormone.

   c. Scrotum - pouch below the penis containing the testicles.

   d. Vas deferens - abdominal tube which connects the testicle to the urethra in the penis; there are two (vasa deferentia).

   e. Urethra - tube running through the penis by which sperm (in the semen) and urine leave the body, but not at the same time.

   f. Prostate - gland in the abdomen that surrounds the urethra and secretes a milky fluid which is part of the semen.

(5:F:3) Describe the effects of the endocrine system on the reproductive system and emotions.

1. The endocrine system is made up of a number of glands which produce and secrete hormones (chemical substances) directly into the bloodstream to regulate growth and body processes.

2. The endocrine system includes the pituitary, testicles or ovaries, thyroid, and adrenal glands.

3. The pituitary, or master gland, produces many hormones which control other glands in the endocrine system.

   a. It is responsible for the growth spurt just before and during puberty.

   b. It stimulates the ovaries to mature and produce female sex hormones, estrogen and progesterone.

   c. It stimulates the testicles to mature and produce male sex hormone, testosterone.

4. Male and female sex hormones are responsible for development of secondary sex characteristics.

5. Female sex hormones trigger ovulation (the release of the ovum), prepare the uterus for pregnancy, and maintain the pregnancy if it should occur.

6. Male hormones stimulate the production of sperm.

7. The physical changes that occur during puberty are not limited to the reproductive system.

   a. Other body organs enlarge; muscles become bigger and stronger.

   b. Appetite increases; more sleep may be required.

   c. Sweat glands become more active and acne is a common problem.

8. The endocrine system affects the emotions; this is particularly evident during puberty.

   a. Mood swings are more common.

   b. Feelings become more intense, including attraction to the opposite sex.

   c. It is normal to have conflicting feelings about needs for independence and needs for parental protection.

(5:F:4) Describe menstruation.

1. Once a month an ovum is released from either ovary and travels through the fallopian tube to the uterus (ovulation).

2. By the time the ovum reaches the uterus, the uterus has developed a soft lining containing many small blood vessels and nourishing fluids.

3. If the ovum has not been fertilized by a sperm, the uterus sheds its lining, along with the unneeded blood and fluids, which pass out of the body through the vagina (menstruation).

4. Menstruation occurs about two weeks after ovulation, and the menstrual flow lasts on the average of three to five days.

5. Some females experience pre-menstrual tension as part of the menstrual cycle.

6. The menstrual flow normally stops only during pregnancy, and while breast feeding, during the the reproductive years, except in unusual circumstances.

(Hygiene--girls only)

7. There are variations in regard to onset and duration of menstrual cycles (onset ages 9-16, cycle length 21-35 days, flow duration 2-7 days).

8. Menstrual periods tend to be irregular at first and then stabilize.

9. Sanitary napkins or tampons may be used to absorb the menstrual flow.

10. Menstruation should not interfere with regular activities, including bathing and swimming.

11. Girls should consult with their mothers in reference to type of sanitary protection to use, unusual vaginal discharge, excessive cramps, and other related concerns.

(5:F:5) Define the meaning of nocturnal emission.

1. Sperm cells begin to form in the testicles of males between the ages of 12 to 15, continuously, and in large numbers.

2. As sperm are carried from the testicles to the penis they mix with a whitish fluid to form semen.

3. Semen leaves the body through a passageway in the penis called the urethra.

4. When spongy tissue in the penis fills with blood it results in an erection.

5. Erections occur with males of every age, including babies.

6. An erection can be caused by a full bladder, tight clothing, thoughts, dreams.

GRADE 5 (continued)

7. A "wet dream," or nocturnal emission, is the spontaneous discharge of semen while sleeping; it relieves pressure of accumulated fluid.

GRADE 6

(6:F:1) Describe the interconnected cooperative roles of the various members of the family.

1. There are many jobs to be done in a family and every member should do a fair share.

2. Family members count on each other for support.

3. Family life is a team effort and members can work together or separately on family tasks.

4. Family members show their love for each other by being responsible and working cooperatively for the benefit of all.

(6:F:2) Recognize the presence of conflict in the family and give examples of ways of resolving family conflicts.

1. Family members often disagree and sometimes these situations are difficult to handle.

2. People can show disagreement by quarreling, not speaking, rough physical treatment, or talking about their problems.

3. Conflict between children and parents often increases during adolescence as the result of peer pressure and a struggle to move from the protection of childhood to the responsible independence of adulthood.

4. The home provides an opportunity to master human relations skills.

5. Parents and children can resolve family conflicts by:

   a. Discussing problems as they arise in an honest, courteous, and respectful manner

   b. Being open-minded, a good listener, and willing to admit you are wrong

c. Putting yourself in the other person's place, trying to understand how you would feel and want to be treated

d. Compromising.

6. Serious family conflicts need professional help (such as clergyperson, family counselor, psychologist, or psychiatrist).

(6:F:3) Describe the anatomy and physiology of the reproductive system.

1. The organs of the female reproductive system work together to make reproduction possible.

a. Ovaries - two oval shaped glands which produce ova and female hormones.

b. Fallopian tubes - structures through which ova travel from the ovaries to the uterus; the usual site of fertilization.

c. Uterus - sometimes called the womb, this pear shaped, muscular organ stretches as it carries the growing baby during pregnancy.

d. Cervix - narrow neck of the uterus which opens into the vagina.

e. Vagina - muscular tube which opens to the outside of the body between the thighs (behind the urethra); passageway for the menstrual flow to leave the body; receives the penis during sexual intercourse; functions as the birth canal.

f. Hymen - thin protective membrane partially covering the vaginal opening.

g. Clitoris - small sensitive organ with many blood vessels and nerve endings; located above the urethra; sensitive to stimulation.

h. Labia - protective folds of skin which cover the opening of the vagina and the opening of the urethra.

i. Ovulation - the release of an ovum from an ovary which occurs about once a month during the reproductive years.

j. Menstruation - flow of tissue, fluid, and blood from the uterus through the vagina; occurs about two weeks after ovulation if fertilization does not occur.

k. Fertilization - uniting of the sperm with the ovum; usually takes place in the fallopian tube.

2. The organs of the male reproductive system work together to make reproduction possible.

a. Penis - organ through which sperm and urine leave the body; loose fold of skin (foreskin) covering the end is often surgically removed after birth (circumcision) to expose the most sensitive part, the glans.

b. Testicles - two oval shaped glands which produce sperm and male hormone.

c. Scrotum - pouch below the penis containing the testicles and special muscles which contract and relax to maintain a constant temperature for the testicles.

d. Vas deferens - abdominal tube which connects the testicle to the urethra in the penis; there are two (vasa deferentia).

e. Urethra - tube running through the penis by which semen (containing sperm) and urine leave the body, but not at the same time.

f. Prostate - gland in the abdomen that surrounds the urethra and secretes a milky fluid which is part of the semen.

g. Seminal vesicles - two glands in the abdomen which contribute additional fluid to the semen.

h. Erection - penis enlarges, becomes stiff, and projects from the body when its spongy tissues fill with blood as the result of stimulation; caused by full bladder, pressure of tight clothing, thoughts, dreams, and self-stimulation (masturbation).

i. Ejaculation - discharge of semen from the penis in a series of spurts.

j. Nocturnal emission - the relase of semen while sleeping; a "wet dream."

3. Emotional changes during puberty are related to the release of increased levels of male and female hormones.

(6:F:4) Recognize that responsible personal behavior is important to peer relationships.

1. Interests, skills, friends, and peer groups change during adolescence.

2. Experimentation (for example, sports, leisure activities) helps to identify strengths, but some forms are risky, like trying drugs, using alcohol, or intimate sexual relations.

3. Building trust, while appreciating individual differences, is important in peer relationships.

4. One should not go along with the crowd if it represents doing something you feel is wrong, and you should not try to influence others to do anything that could be harmful.

5. Choices should be made with regard to risks, rewards, and possible consequences to self and others.

GRADE 7

(7:F:1) Identify physical and emotional health factors important to family living.

1. These factors reflect universal basic needs, are closely interwoven, and one can be seriously affected by the other.

2. They include provision of:

   a. Suitable housing so that family members are comfortable, safe, secure, and have privacy

   b. Nutritionally balanced meals served under conditions which are favorable to family interaction

   c. Adequate rest, exercise, and satisfying leisure activities

d. Love and affection among family members which fosters self-esteem.

3. Family members are always changing and needs vary (in degree) throughout a lifetime.

4. Individuals and families have their ups and downs.

   a. Illness creates new demands.

   b. Sibling rivalry can cause frequent fighting.

   c. Outside forces can generate stress.

5. Open expression of feelings is valuable in understanding family members' needs.

(7:F:2) Identify community resources for resolving family conflict.

1. Sometimes people have difficulty dealing with problems and adjusting to changes that take place in their lives.

2. They may turn to heavy drinking or other forms of abuse for temporary relief of stress, and this only compounds their problems. (Abuse can include anything from regular use of tranquilizers to assault of family members.)

3. Community resources which have been found to be helpful in dealing with serious family conflicts are: the guidance counselor, school nurse, child study team (school psychologist), physicians, clergy, Community Mental Health Center, Alateen, Alcoholics Anonymous, Alanon, and the police department.

(7:F:3) Recognize social problems that occur during puberty.

1. Physical changes during puberty are various and uneven, causing much concern about the body.

2. Emotional changes during puberty include mood fluctuations.

   a. One day a person may be happy/cooperative and the next day sad/difficult; insecure/childish then self-confident/grown up.

b. Intense friendships and crushes (short-lived) are common.

c. Signs of insecurity are: clowning around, gossiping, always agreeing, being extremely critical, acting like a bully, bragging, strutting, daydreaming to escape.

3. Seventh graders depend on the group for support and feel more secure if they look, act, and talk alike.

a. With increasing age, they feel more secure, become more individual, and the group has less influence on their decisions.

b. It is not always easy to live up to the demands of the group.

c. Getting along with others does not mean always agreeing or going along with the crowd, especially when it is something thought to be wrong.

d. Listen to and try to understand others, treating them as you would like to be treated.

4. Group activities give an opportunity to develop the social skills needed to function as an adult.

(7:F:4) Explain anatomy and physiology of human reproduction. (Review)

(7:F:5) Describe how sexuality is exploited through pornography, advertising, movies, and television.

1. Human sexuality is more than sex (gender or sexual intercourse); it is everything you are and do throughout life as a male or female.

2. A major part of sexuality is your perception of what it means to be masculine or feminine and how you are expected to act as a male or female.

a. Sex roles are learned early in life (by the way we are dressed, the kind of toys received, what we are encouraged to do, our observations of others, what we see in books or on television).

b. Historically, sex roles were divided into two categories, and generalizations were made (man is strong, aggressive, brave, and independent; woman is weak, passive, fearful, and dependent).

c. Generalizations or stereotypes are confining and unfair because they do not reflect individual differences.

d. Masculine and feminine roles are changing in our society but stereotypes are still common.

3. The media exploit sexuality by using sex to attract large audiences and increase profits.

a. Most of what is presented in films and magazines is fantasy--unachievable in real life.

b. We are made to think that a flawless body and a successful love life are the most important things in life.

c. Advertisements make us feel inadequate about our bodies and our sexuality so we will buy their products.

d. Standards set for masculinity and femininity are impossible to meet.

4. Pornography is another form of exploitation; it uses offensive pictures or language for the purpose of arousing sexual desire.

(7:F:6) Recognize what child abuse, sexual assault, molestation, and incest are and what the victim can do about it.

1. Child abuse includes harsh and insulting language, severe beatings, or other unpleasant treatment that may result in injury to the body or mind of a child.

2. Molestation is a mild form of abuse, like annoying or disturbing treatment (touching another person's body without that person's approval).

3. Sexual assault is a violent act with the threat of physical harm and often results in rape (sexual intercourse with a person against that person's will--considered an act of violence rather than an act of sex).

4. Incest involves sexual intercourse between relatives who are too closely related to marry (father/daughter, mother/son, brother/sister).

5. The victim of any of these acts is innocent and not at fault.

6. The victim should report any such act (immediately) to a reliable adult.

GRADE 8

(8:F:1) Describe family patterns in the United States.

1. In the past, the most common type of American family included the mother, father, children, and then was extended to include the grandmother, grandfather, aunts, uncles, cousins; authority often was in the hands of the oldest male member.

   a. Extended families exist today but are less common than they were.

   b. Advantages of an extended family are: greater emotional and economic support, less loneliness, children can benefit from the knowledge and skills of others.

   c. Disadvantages are: less privacy and greater complexity of family interaction.

2. The present trend of family patterns in the United States is a shift to the nuclear family, which includes only the immediate family unit (mother, father, children).

   a. This common pattern is a result of urban living.

   b. There is likely to be equal authority and division of labor with flexible roles, and leisure time spent mostly together and including mutual friends.

   c. Advantages of the nuclear family include more privacy and greater mobility.

   d. Disadvantages are the absence of complex interactions and extended emotional support, causing loneliness and stress for some people.

3. There are many variations of extended and nuclear families and they include:

   a. Only one parent due to separation, divorce, or death

   b. Stepparent and stepchildren

   c. Adopted children

   d. No children

   e. Children living with a guardian, grandparent, aunt, uncle, or other family member

   f. Foster children who live with someone other than a parent.

(8:F:2) Identify characteristics of emotional maturity.

1. Emotional maturity occurs when a person has a good understanding of him/herself and his/her emotions and it includes:

   a. Positive feelings of love and affection

   b. Ability to deal with emotions like anger, fear, and frustration in healthful ways.

2. Emotional maturity requires good self-discipline and high self-esteem.

3. An emotionally mature person is independent, can solve problems, knows when to get help, accepts situations that cannot be changed.

(8:F:3) Recognize the effects of peer pressure.

1. Much of what we learn in life is the result of experimentation; some forms are relatively safe (like trying a new hairdo or wearing strange looking clothes) and others are risky (like taking drugs, using alcohol, or having intimate sexual relations).

2. Sometimes people experiment, not only because they are curious, but in order to be accepted by another person or the crowd and not be called "chicken" or "weird." (They feel forced or pressured.)

3. Each person is responsible for his/her actions and the consequences of an act should be considered before committing it.

4. The value of a friendship is questionable when it involves doing something risky or against your wishes and better judgment.

(8:F:4) Accept sexuality as a healthy aspect of the total personality.

1. Human sexuality is everything you are and do throughout your life as a male or female.

2. It is more than gender or sexual intercourse; it includes how you feel, live, get along with others, your self-identity.

3. It is personal, private and unique--a wholesome part of your personality.

4. You always have been and always will be a sexual being.

(8:F:5) Explain the purpose and process of dating.

1. The purpose of dating is to learn more about yourself and others, especially members of the opposite sex, while taking part in activities and having a good time.

2. Since feelings and emotions about members of the opposite sex are directly related to physical development, there are differences in readiness and in the behavior that can be expected for boys and girls the same age.

3. A good way to overcome the shyness and discomfort that may be experienced in early dating is to participate in planned group activities and double dating.

4. Many young people like a variety in dating partners while others prefer to go steady; there are advantages and disadvantages to both.

5. Successful dating depends upon mutual understanding and respect; it includes good grooming and cleanliness, keeping each other and parents informed about plans, and being on time.

6. It has been traditional for the boy to ask the girl for a date, call for her, and pay the expenses, but there are acceptable variations of this custom.

7. Most restrictions on dating are based on common sense and include restraint in expressing affections since intimate caresses can be so stimulating that they lead to sexual intercourse (which sometimes results in pregnancy).

(8:F:6) Recognize the importance of developing standards for responsible sexual behavior.

1. Sexual attraction is normal and frequently strong between dating teenagers; therefore, decisions about sexual behavior have to be made.

2. Because sexual intercourse can result in pregnancy, it traditionally has been reserved for married couples; however, sexual standards of American society are changing, partly as a result of media exploitation.

3. Standards of sexual behavior are influenced by society, your family, your religion, and your friends.

4. Being mature means developing personal standards which are appropriate for you and reflect responsible behavior.

5. Because dating couples can rapidly progress from necking, to petting, to sexual intercourse, and since it is difficult to make an intelligent, responsible decision when involved in sexual activity, standards for personal conduct should be set in advance, clearly communicated, and then firmly held.

(8:F:7) Explain the process of fertilization and pregnancy.

1. Fertilization occurs when a mature ovum is released from a follicle (little sac) in one of the ovaries and is swept into the fallopian tube where it unites with a sperm.

2. During sexual intercourse, the erect penis enters the vagina and deposits semen containing millions of sperm; these cells have tails that move them from the vagina, through the uterus, and into the fallopian tubes.

3. Only one sperm cell is needed to fertilize a single egg cell.

4. A female's fertile period is the time when the ovum is capable of being fertilized, usually two weeks before her menstrual period.

5. Intercourse two days before ovulation, the day of ovulation, or one day after ovulation, may result in pregnancy since sperm cells can live in the fallopian tubes for several days.

6. It is difficult to predict, in any given cycle, exactly when ovulation will occur.

7. If the mature ovum unites with the sperm, the fertilized cell divides into two cells, the two cells divide into four cells, and so on, forming a cluster as it moves from the fallopian tube to the uterus--where it implants in the lining and develops into a baby.

8. A female does not become pregnant every time she has sexual intercourse, and pregnancy <u>can occur without sexual intercourse</u> if sperm are deposited near the vaginal opening.

9. Early signs of pregnancy include a missed menstrual period and morning sickness (nausea), but a physician's examination is needed for confirmation.

10. Later signs of pregnancy include enlarged breasts and abdomen, as well as weight gain; eventually a heart beat can be heard with a stethoscope and movement can be felt.

11. Pregnancy lasts about nine months and is divided into trimesters (periods of three months).

    a. During most of the first trimester, the developing baby is called an embryo; it is referred to as a fetus during the end of the first trimester and throughout all of the second and third trimesters.

b. In the first trimester, cells divide and begin to specialize into different types of body tissue; the placenta, umbilical cord, membranes filled with a protective fluid develop; the embryo is susceptible to developmental defects and miscarriage; medical supervision is important.

c. During the second trimester, the fetus becomes more human in appearance, sucks its thumb and kicks; it is not ready to exist on its own.

d. The third trimester involves refinement of body organs and function; the fetus is much more active and has a better chance of survival.

11. The childbirth process is called labor and delivery.

a. Membranes surrounding the fetus rupture and their protective fluid flows out of the birth canal.

b. Muscles of the uterus contract to push the fetus from the uterus to the vagina and out through the vaginal opening.

c. After the baby is born, the umbilical cord is cut and the placenta to which it was attached is delivered.

(8:F:8) Identify common sexually transmitted diseases, their prevention, and their control.

1. All infectious diseases are caused by organisms called pathogens and some are spread by sexual or close personal contact; such a disease is called a sexually transmitted disease (STD) or a venereal disease (VD).

2. A person may have more than one STD at the same time, and some STDs can be spread from mother to baby.

3. STDs are a major health problem among young Americans; many do not know they have an infection and others do not seek treatment which can cure it.

4. Syphilis is caused by a bacterium and appears in three stages.

   a. First stage - chancre or painless sore appears near the genital organs (penis or vagina) or in the mouth; later, chancre disappears, but the disease remains in the body.

   b. Second stage - if untreated, disease may reappear with symptoms such as sore throat, rash, swollen joints, or hair loss; these later disappear, but the disease remains in the body.

   c. Third stage - if untreated, disease can cause blindness, insanity, damage to major body organs and death.

5. Gonorrhea is caused by a bacterium different from the one that causes syphilis.

   a. Early symptoms may include discharge from the penis or vagina, or a burning sensation during urination, but some men and many women have no symptoms.

   b. Untreated, gonorrhea can spread into a woman's uterus and fallopian tubes causing pain and fever; a common complication for men and women is sterilization resulting from tubal blockage.

   c. Both syphilis and gonorrhea generally respond to drug treatment, but some strains of gonorrhea are drug resistant.

   d. Reappearance of symptoms suggests reinfection and requires new treatment.

6. Genital herpes is a viral infection.

   a. It produces extremely painful blister-like sores on the penis, on the labia, and in the vagina; it causes swelling and painful urination.

   b. There is no known cure and it tends to reappear; there is medical treatment for pain, but it is best to prevent it.

7. Crabs (lice) and scabies (mites) are more annoying than they are dangerous; they cause intense itching; they can be treated with special soaps for the body and special laundry procedures.

8. Prevention and control of STDs is the responsibility of each individual.

   a. Avoiding exposure is the best prevention; other measures have limited effectiveness (washing, urinating, and use of condom).

   b. Anyone who thinks he/she has been exposed to a sexually transmitted disease should seek immediate medical treatment and notify contacts. (Self-treatment is not effective.)

GRADE 9

(9:F:1) Identify forces that affect emotions.

1. Emotions are strong feelings; some are pleasant and others are unpleasant, but all are affected by both heredity and environment.

2. Our general disposition, or emotional temperament, is only partly dependent on hereditary factors.

   a. At the time of conception, each of us receives the basic potential for development and behavior (physical structure, patterns of growth, how we think, feel, and act).

   b. There are inherited tendencies toward certain levels of activity, sensitivity to stimuli, and adaptability.

   c. Our inherited abilities to retain information, to reason, and to learn affect the way we deal with our feelings.

   d. Heredity influences the biological processes which cause physical and emotional changes during puberty (development of secondary sex characteristics and more intense feelings, like attraction to the opposite sex).

3. Environmental factors interact with heredity to influence emotional behavior.

   a. We develop positive feelings of love, affection, security, independence, self-esteem, self-control; and we learn how to express these emotions as a result of our experience with parents and through relationships with other people.

   b. We also learn how to deal with negative feelings like fear, anger, frustration, loneliness, and depression as a result of our experiences with parents and others.

4. People should try to understand their feelings and express them in positive ways.

   a. Our emotions can be easily stirred by the emotions of others.

   b. Most teens experience intense emotions and these may be both mixed and confusing.

   c. Negative feelings can lead to physical illness, severe headaches, nervous disorders, and social problems.

   d. Emotionally immature people deal with problems by making excuses, blaming others, daydreaming to escape reality, abusing drugs, running away, or threatening suicide.

   e. Emotionally mature people deal with problems in healthful ways without harming themselves or others; they talk about their feelings, try to find answers to problems, accept what they cannot change--facing things as they really are.

   f. The emotionally mature person has self-discipline and self-esteem, is independent and responsible, appreciates maleness and femaleness, understands how our emotions affect our relationships with others.

5. Although hereditary and environmental forces influence our emotions, the individual can alter and improve his/her emotional habits by realizing the need for self improvement, having a strong desire to improve, analyzing personal strengths and weaknesses, and developing a systematic plan for change.

(9:F:2) Accept sexuality as a healthy aspect of the total personality.

1. Your personality includes your body and how it functions, your appearance, intelligence, feelings, habits, attitudes, values, beliefs, behavior, special strengths, talents, limitations--the total picture of you.

2. Your sexuality is a vital part of your personality and includes everything you are and do as a male or female, throughout life.

   a. Sexuality is more than sex (gender or sexual intercourse).

   b. Sexuality includes how you live and get along with others, your self-identity; it is personal, private, unique, and a wholesome part of your personality.

3. Sexual feelings can be intense and confusing.

   a. You should feel comfortable with yourself and with others about being sexual.

   b. You have your entire life to be sexual; you do not have to prove your sexuality by your sexual experiences; you should not feel worried about or rushed into sexual activities for which you are not ready.

   c. The best way to handle mixed feelings about sexual behavior is to postpone involvement until a comfortable decision can be made.

   d. Sometimes people experiment with sex and wish they had not; in this case it is best to stop the behavior and not dwell on it.

   e. Alcohol and other drugs can interfere with healthy and responsible expression of sexual feelings.

   f. Sexuality is a life force that has many purposes; if we limit our concept of it purely to the physical act, then we limit our whole lives.

4. Understanding the similarities and differences in male and female sexual make-up should enable each to help the other manage and appreciate his/her own sexuality.

(9:F:3) Recognize the importance of expressing feelings in social relationships with others.

1. Problems and misunderstandings often arise because people have not learned to talk and listen to each other.

2. Sometimes feelings get between you and what you want to say; when upset, you may be unable or unwilling to make your point clearly or you may be unable to listen to what the other person is saying.

3. At times communications come to a standstill because put-downs (belittling remarks) are made; a person may not show hurt feelings, but these feelings may exist and interfere with further communications.

4. You can hurt someone deeply without saying a word; a negative attitude is expressed through a yawn, shrug, turn of the back, or by not sitting next to a person; positive attitudes can be conveyed by a wink, pat on the back, or a friendly wave of the hand.

5. Meaningful communications include shared experiences, ideas, viewpoints, and feelings.

(9:F:4) Explain the influence of heredity and environment upon human growth and development.

1. Heredity and environment interact to influence human growth and development.

2. Physical, mental, and emotional traits are passed from parents to children in a process called heredity.

   a. Chromosomes are threadlike particles of matter found in the nucleus of all cells; they are made up of complicated chemical substances called DNA which carry coded messages for reproduction; the female ovum and the male sperm each contribute 23 chromosomes. A total of 46 chromosomes, or 23 pairs of chromosomes, exist in the <u>fertilized</u> ovum.

   b. Sex is determined by a chromosome in the sperm at the moment of conception.

c. Chromosomes consist of smaller particles of matter, known as genes, which are responsible for individual traits such as body build, hair color, intelligence, growth patterns.

d. Brothers and sisters are not exactly alike because each parent has at least two genes for a single trait.

e. For every inherited trait, the child gets at least one gene from the mother and one from the father; the genes pair together.

f. Some genes are dominant (stronger than others) and some are recessive (less likely to be expressed).

g. Abnormal traits can be passed on from parents to children; recessive genes for an abnormal condition will not be noticed unless parents contribute the same recessive genes, a condition which is more likely to occur when people of the same hereditary background mate.

3. Environmental factors which affect the growth and development of a child include all experiences, conditions, and influences that have been part of the growing process.

   a. Long before birth, and throughout one's life, the environment plays a major role in growth and development.

   b. Maternal illness during pregnancy (rubella or syphilis) or an influence before pregnancy (exposure to radiation or toxic chemicals) can affect the development of a child.

   c. Environmental factors that influence individual growth and development include: how physical needs are met (nutrition, exercise, sleep), where you live (city, town, farm), what type of school you attend (size and quality), family life (rank order among siblings, type of discipline, quality of relationships), and many others.

4. Much of what a person will be during life is determined after birth by how he/she uses the potential of his/her heredity and evironment.

(9:F:5) Explain male and female reproductive systems.

1. The female reproductive system and its function.

   a. Ovaries - two oval shaped glands situated deep in the pelvic cavity, one on each side attached to the uterus by a ligament.

      (1) Hormones produced by the ovaries are estrogen and progesterone.

      (2) Within the ovaries are many sacs called ovarian follicles which contain immature egg cells (ova); approximately 400,000 immature follicles with ova are present at birth, and only about 400 ever mature.

   b. Fallopian tubes - two ducts which extend from the uterus out to the ovaries; they are the structures through which ova travel from the ovaries to the uterus and are the usual site of fertilization.

      (1) The extreme end of each tube is fringed and these fingerlike projections (fimbria) catch the egg after it leaves the ovary, passing it into the fallopian tube.

      (2) The ovum is round and cannot move by itself; it is propelled toward the uterus by minute hairs (cilia) in the lining of the fallopian tube and contractions of the tube (peristalsis).

   c. Uterus - (womb) about the size and shape of a small pear, this hollow but thick muscular organ is suspended in the lower pelvis, by several ligaments, in a forward tilt position.

      (1) The body is the upper section; the cervix is the narrow neck which opens into the vagina.

      (2) The endometrium, or lining, is richly supplied with blood vessels and glands that nourish the fertilized ovum.

      (3) In pregnancy, the uterus stretches to over 12 inches in length to accommodate the growth of the developing baby; within six weeks after the birth of the baby, the uterus returns to almost its orginal size.

d. Vagina - muscular tube approximately four inches in length extending from the uterus to the outside of the body.

   (1) It serves as the passageway for the menstrual flow to leave the body, receives the penis during sexual intercourse, and functions as the birth canal.

   (2) When relaxed, this cavity is closed and the walls touch each other; it has the capacity to accommodate the menstrual flow, an erect penis, and a fully developed fetus during childbirth.

   (3) Glands in the lining of the vagina secrete mucus which provides natural internal cleansing and lubrication.

e. Hymen - a protective membrane partially covering the vaginal opening; it is usually thin, but it varies in size and thickness; it may remain intact until first intercourse, but it can be stretched or ruptured by participation in active sports, insertions of a tampon, or during physician's examination.

f. Labia - two pairs of liplike structures around the external opening of the vagina.

   (1) Labia majora - the outer and larger pair, these rounded folds of skin and fatty tissue are covered by pubic hair; they protect the structures lying between them and the vagina.

   (2) Labia minora - just inside the labia majora, they are smaller and thinner folds or inner lips.

   (3) Both pairs, especially the inner labia, are generously supplied with nerve endings and blood vessels, making them sensitive to stimulation.

g. Clitoris - structure somewhat similar to a small penis; it is located where the upper folds of the labia minora meet and is covered by the labia majora.

   (1) It is supplied with many blood vessels and nerve endings; fills with blood and enlarges during sexual stimulation.

   (2) Unlike the male penis, the clitoris does <u>not</u> contain the urethra; the opening to the urethra is below the clitoris and above the vagina.

h. Vulva - term usually used to describe the external genitals of the female, namely, the hymen, labia, and clitoris.

   (1) The opening to the urethra is not part of the reproductive system in the female, but it is located within the vulva between the clitoris and the vaginal opening.

   (2) The anus is the rectal opening behind the vulva where solid waste, or feces, leaves the body.

i. Breasts - although not considered part of the reproductive system, they have a rich supply of blood vessels and nerve endings which makes them sensitive to sexual stimulation; they produce milk for infant feeding.

   (1) Size varies among women, and it is common for one breast to be larger than the other.

   (2) Size has nothing to do with the ability to have children, to breast-feed, or to enjoy sexual activity.

j. Ovulation - the release of a mature ovum from an ovarian follicle; it occurs about two weeks before menstruation, or on the fourteenth day of a 28 day menstrual cycle.

k. Menstruation - the monthly flow of tissue, fluid, and blood from the uterus which occurs when the mature ovum is not fertilized.

1. Menopause - (climacteric) the time of life when production of female hormones declines, the woman stops producing mature ova, and the menstrual cycle ceases; it usually occurs between the ages of 45 and 50.

m. Related information

(1) Gynecologist - a physician specializing in female health problems.

(2) Obstetrician - a physician specializing in care of women during pregnancy, childbirth, and the postnatal period.

(3) Pap test - microscopic examination of cells scraped from the cervix; it is useful in cancer detection.

(4) Hysterectomy - surgical removal of the uterus.

(5) Frigidity - female's lack of interest and responsiveness to sexual activity; the cause can be emotional or physical; the woman can still reproduce.

2. The male reproductive system and its function.

a. Testicles - two oval shaped glands suspended outside the body in a sac called the scrotum; they produce both sperm and the male hormone, testosterone; they may vary in size and one usually is positioned lower than the other.

(1) The testicles are formed in the abdominal cavity but descend into the scrotum shortly before birth in most boys; failure to descend can lead to sterility (an inability to produce sperm), but this condition may be corrected with surgery.

(2) Seminiferous tubules are small tubes inside the testicles where sperm cells continually form, beginning during puberty and continuing throughout the lifetime of the male; sperm production starts slowly, but it increases until sexual maturity when the male produces 10 to 30 billion sperm each month.

(3) Sperm cells consist of a head (where chromosomes are located), a neck, and a tail (which develops a whiplike motion).

b. Scrotum - sac which contains the testicles and the cremaster muscles.

(1) The cremaster muscles contract to pull the the testicles closer to the body in cold weather and they relax to suspend the testicles further from the body in warm weather, producing the ideal temperature for sperm production.

(2) Sweat glands in the scrotum contribute to cooling of the testicles in hot weather.

c. Epididymis - a chamber containing a coiled tube where sperm cells are stored and mature; it is attached to the upper side of the testicle.

d. Vas deferens - duct about 15 to 18 inches long which passes through the abdomen carrying sperm from the epididymis of the testicle to the urethra in the penis.

(1) The walls of the vas deferens are lined with cilia (hairlike projections) and are capable of peristalsis (powerful contractions) that help move the sperm along; at this point, sperm are <u>not</u> motile (capable of moving themselves).

(2) The vas deferens serves as a place for further storage of sperm.

e. Seminal vesicle - gland which secretes a clear, sticky, nourishing substance into the semen; the sperm convert this substance into energy which gives them motility.

f. Prostate gland - structure in the abdomen made of 30-40 small glands; it surrounds and opens into the urethra; it secretes a milky substance which is a protective alkaline buffer in the semen; it is a common site of infection.

g. Cowper's gland - about the size of a pea, each of these two glands is situated on either side of the urethra below the prostate.

(1) It secretes an alkaline fluid which looks like limewater and neutralizes the acidity in the urethra when semen enters the urethra.

(2) This secretion precedes the main flow of semen leaving the body; it often contains sperm cells.

h. Urethra - tube running through the penis by which urine and semen leave the body; urine and semen do not pass through at the same time because a muscle closes the connection between the bladder and urethra when semen enters the urethra.

i. Penis - external male reproductive organ through which urine and semen leave the body; it is variable in size (average three and a half to four inches in length when relaxed and six inches during erection - the relative increase in size is greater for smaller penises than for larger ones).

(1) It has many nerve receptors and is extremely sensitive to stimulation.

(2) It contains spongy tissue with many blood vessels which fill with blood during sexual stimulation, causing the penis to enlarge, stiffen, and protrude from the body (called an erection).

(3) When a male has an erection as the result of sexual stimulation, muscles in the penis and lower abdomen contract forcing semen through the urethra in a series of spurts called an ejaculation; following ejaculation, the penis returns to its relaxed state, becoming smaller and limp.

(4) During ejaculation, approximately one teaspoonful of semen is released containing 200 to 300 million sperm cells.

(5) Glans - tip of the penis which is richly supplied with nerve receptors making it especially sensitive to stimulation.

(6) Foreskin - fold of skin which covers the glans of the penis in the relaxed state; it is often surgically removed shortly after birth to expose the glans in a procedure called circumcision.

j. Nocturnal emission - involuntary discharge of semen in the male during sleep.

k. Climacteric - although men continue to produce sperm throughout life, beginning at puberty, a decline in production of male hormone and number of sperm cells may occur in the late 50's or early 60's.

l. Related information

(1) Prostatectomy - surgical removal of a portion or all of the prostate gland;it may or may not result in impotency depending upon the procedure and the amount of tissue removed.

(2) Impotency - inability to achieve or maintain an erection in sexual activity; the cause can be emotional or physical; it interferes with the ability to reproduce; it commonly occurs under the influence of alcohol.

(3) Urologist - physician who specializes in the urinary problems of males and females, as well as genital problems of males.

(4) Inseminate - to impregnate or cause pregnancy.

(5) Coitus - sexual intercourse.

(6) Orgasm - sexual climax which occurs in both males and females.

(9:F:6) Describe signs and symptoms of pregnancy.

1. Presumptive signs (usually observed by the mother):

a. Failure to menstruate (two missed menstrual periods is a strong indication)

b. Nausea and vomiting (called morning sickness) may occur within two to three weeks of a missed period

c. Enlargement and tenderness of the breasts; nipples become darker in color and there may be a secretion

d. Frequency of urination

e. Fatigue and need for more sleep than usual.

2. Probable signs (usually discovered by the physician):

a. Enlargement of the abdomen

b. Changes in the shape, size, and consistency of the uterus

c. Cervical changes (usually softer with a bluish tint)

d. Uterine contractions

e. Determination of the fetal outline

f. Positive hormonal tests.

3. Positive signs:

a. Fetal skeleton can be seen by x-ray (after six weeks of pregnancy)

b. Fetal heartbeat heard (around the third month; it is twice as fast as the mother's heartbeat)

c. Perception of active fetal movements (this occurs after five months of pregnancy).

(9:F:7) Describe process of conception and pregnancy.

1. Fertilization occurs when a mature ovum is released from a follicle in either ovary and swept into the fallopian tube where it unites with a sperm.

a. During sexual intercourse, semen containing millions of sperm is deposited deep in the vagina near the cervix; the sperm swim from the vagina through the cervix to the uterus and

to both fallopian tubes (insemination).

b. Much semen is lost when the penis is withdrawn from the vagina; however, most of the sperm cells are concentrated in the first few drops of ejaculate, and they adhere to the mucus surrounding the cervix.

c. Although only one sperm unites with the ovum, many others surround the egg and produce an enzyme (chemical) which helps to soften the outer wall of the ovum, allowing the sperm to enter.

d. As soon as one sperm penetrates the egg, the outer egg covering thickens, preventing other sperm from entering.

e. Following entry, the tail of the sperm detaches and the nucleus in the head of the sperm cell unites with the nucleus in the egg cell; fertilization has been completed.

f. The new united cell has 23 chromosomes received from the ovum and 23 chromosomes received from the sperm (a total of 46, or 23 pairs); the fertilized cell is referred to as a zygote.

g. Once the fertilization process is completed, we say that conception has occurred and the woman is pregnant.

2. Implantation occurs after the zygote (fertilized ovum) travels from the fallopian tube, floats freely in the uterus, later attaches to and finally becomes firmly imbedded in the uterine lining.

a. Between fertilization and implantation (about two weeks), the zygote begins to reproduce itself by dividing and forming a hollow cluster of cells which becomes the embryo.

b. The embryo receives nourishment from the mother through blood vessels in the endometrium (lining of the uterus) as cells continue to divide.

3. Embryonic development continues for two months after conception.

a. Membranes develop from embryonic cells and surround the embryo; the amniotic membrane secretes

fluid which serves as a temperature regulator and shock absorber, keeping the developing baby in suspension; the chorionic membrane connects with the inner lining of the uterus.

b. Small fingerlike projections (villi) attach the embryo to the uterine lining, allowing oxygen, food, water, and waste to be transferred between the embryo and the mother.

(1) These villi later develop into the placenta which continues this function.

(2) The umbilical cord extends from the placenta connecting the mother to the child; there is <u>not a direct blood connection</u>.

c. The contents of a yolk sac provide nourishment to the developing embryo.

d. About two weeks after conception, cells of the embryo begin to specialize, or differentiate, into various types of tissues, such as skin, muscle, nerve, and bone.

(1) The mass of cells of the embryo elongates; one end develops a bulge which becomes the head, and other buds form toward the top and bottom to become arms and legs.

(2) By the end of the second month, the embryo is more than one inch long, the body is covered with thin skin, most major body structures are formed, and the heart is beating; from this point on, the growing baby is known as a fetus.

4. Fetal development includes the growth period from two months after conception until birth.

a. The change from an embryo to a fetus is not abrupt but is gradual and marked, for the most part, with an increase in size and refinement of body structures and functions.

b. By the third month of development, sex can be determined and heart sounds can be heard (as early as ten to twelve weeks with ultrasound devices and around fourteen to sixteen weeks with a stethoscope.)

c. From the third to sixth months (second trimester), the fetus becomes quite human in appearance, the heartbeat can be heard, and movements can be felt; but the developing baby is not ready to exist on its own.

d. From the sixth to ninth months (third trimester), the fetus is more active, gains weight rapidly, and has a better chance of survival.

5. Childbirth is a process called labor and delivery.

a. The first stage of labor begins with regular contractions of the uterus; it lasts until the cervix is fully dilated and ready for passage of the fetus.

(1) Membranes may rupture releasing the amniotic fluid, or there may be a discharge of dark bloody mucus (bloody show).

(2) Discomfort usually begins in the small of the back and sweeps to the front of the abdomen.

(3) As labor progresses, contractions become more frequent, more intense, and last longer.

b. The second stage of labor begins with full dilatation (opening) of the cervix and ends when the birth is completed, 20 to 50 minutes later.

(1) Contractions are more severe; membranes rupture if this has not already happened, and the mother has the strong urge to bear down.

(2) Muscles of the uterus push the fetus from the uterus to the vagina and out through the vaginal opening, rotating the fetus as it emerges, usually head first; an episiotomy may be performed to enlarge the opening.

(3) The physician (or midwife) assists the baby in breathing, then ties and cuts the umbilical cord.

c. The third stage of labor takes about five to ten minutes; contractions resume to separate the placenta from the uterine wall; then the placenta, remaining section of the umbilical cord to which it is attached, and the membranes are expelled.

d. Labor lasts about 12 hours during the first delivery and is considerably shorter during subsequent deliveries.

6. Multiple births occur when the uterus contains two or more embryos.

a. Usually, one mature ovum is released from the ovary, is fertilized by one sperm, and then develops into a single embryo.

b. Fraternal twins develop when two separate eggs are fertilized by two separate sperm; they are genetically different individuals developing at one time; they may or may not share a placenta; they may be of the same or opposite sex; and they do not necessarily resemble each other.

c. Identical twins develop when one mature egg is fertilized by a single sperm and completely divides into halves forming two genetically identical embryos.

d. Triplets, quadruplets, and quintuplets can be fraternal, identical, or a combination of both.

7. Ectopic pregnancy involves development of the fertilized egg outside of the uterus; the most common site is in the fallopian tube which ruptures when it cannot expand to accommodate the growing embryo; women who have had gonorrhea are especially susceptible to this problem.

8. Miscarriage (spontaneous abortion) is the involuntary expulsion of the embryo or fetus before it can survive on its own (through the first six months of pregnancy); the majority occur during the second and third months of pregnancy, and the most common cause is faulty development of the embryo or fetus.

9. A premature birth is one that occurs during the seventh or eighth month of pregnancy.

10. Birth defects, or congenital defects, are deformities present at the time of birth; they can be mental, physical, or both; some are caused by faulty genes, others are caused by factors in the environment, and there can be a combination of both; mothers under 18 and over 40 years of age produce a greater percentage of defective children than other mothers.

    a. Environmental factors known to cause birth defects are: exposure of the mother to infectious diseases (rubella, syphilis), x-rays, drugs (thalidomide, alcohol in large doses), smoking, poor diet, complications during labor and delivery.

    b. Hereditary factors known to influence birth defects are a family history of an inherited defect (cystic fibrosis, sickle cell anemia) and marriage of close relatives.

    c. Prevention of birth defects includes reliable genetic counseling, avoidance of known causes, good prenatal care, and competent medical attendance during labor and delivery.

(9:F:8) Recognize the importance of sound prenatal care for the prospective mother.

1. Good prenatal care includes periodic visits with a physician, usually an obstetrician, throughout the pregnancy.

    a. A family history and personal history are taken to determine the likelihood of complications.

    b. Laboratory tests provide standards for comparison of present conditions and those of later pregnancy; these tests make it possible to correct health factors which may interfere with the mother's or child's health.

    c. The initial examination determines if the mother has the capacity to withstand the stress and strain of pregnancy, labor, and delivery.

    d. Regular visits provide the opportunity to discuss questions that arise during the pregnancy and for the physician to monitor blood pressure, weight, urine, fetal heartbeat, fetal development, and fetal position.

2. The most important part of prenatal care is carried out by the mother.

   a. Weight control, diet, exercise, bowel function, rest, relaxation, and sleep need to be adequate to prevent complications to the mother and child.

   b. The pregnant mother needs to know what to avoid and how to identify signs of distress (bleeding, cramps, edema).

   c. Common complaints during the prenatal period include fatigue, morning sickness, leg cramps, heartburn, urinary frequency.

(9:F:9) Identify the purposes and methods of family planning.

1. Family planning means creating a family according to a purposeful design; the purpose of family planning is to postpone or prevent an unwanted pregnancy and to improve prospects of achieving a pregnancy that is wanted; reasons people give for family planare:

   a. Concern about the rate of world population growth;

   b. Not married or not ready for the responsibility of a family;

   c. Need for time to adjust during early marriage;

   d. Wish to complete education, pursue a career, be better able to afford children;

   e. Medical problems or hereditary conditions with high potential for affecting the mother or child;

   f. Need to space children to preserve the strength, health, and emotional well being of the mother or other family members;

   g. Wish to avoid pregnancy altogether.

2. Family planning may involve the use of some device or technique to prevent pregnancy; most contraceptive devices work by preventing the fertilization of an ovum by a sperm; use of these devices involves the assumption of increased personal responsibility;

continuing follow-up with physician or other health specialist to monitor possible side effects is essential with the use of some devices.

a. Abstinence - requires that a couple restrain themselves from having sexual intercourse either completely or during the time when fertilization is likely to occur; complete abstinence is the most effective method of contraception.

b. The Pill - combines estrogen and progesterone; suppresses ovulation by acting on the pituitary gland; must be prescribed by a physician and taken exactly as directed to be effective--99 percent; has side effects.

c. Mini-pill - contains progesterone only; is slightly less effective than the combination pills but has reduced side effects.

d. IUD - intrauterine device--foreign object placed in the uterus; thought to interfere with fertilization and implantation; highly effective but needs to be inserted by a physician and can be expelled without notice.

e. Diaphragm - rubber device that covers the cervix; comes in different sizes and must be fitted by a physician; must be used with a spermicide (additional spermicide before each act of intercourse), inserted, and left in place as directed in order to be highly effective.

f. Condom - stretchable rubber sheath that covers the penis; must be applied over erect penis and held in place during withdrawal; no prescription needed; protects against VD/STD; is highly effective when used carefully and with a spermicide; a new one is needed each time sexual intercourse occurs.

g. Spermicide - vaginal foam, jelly, cream, or suppository; kills sperm or decreases sperm motility; no prescription needed; causes irritation in some people; only moderately effective if not used with a diaphragm or condom; needs to be inserted shortly before intercourse and newly applied during each subsequent act.

h. Rhythm - avoiding intercourse during the woman's fertile period; requires regular menstrual cycle and ovulation can occur when not predicted; body temperature and mucous secretions may be observed to enhance accuracy.

i. Withdrawal - removal of the penis from the vagina before ejaculation; unreliable.

j. Douching - washing out the vagina after intercourse; ineffective and may actually force ejaculate through the cervix.

k. Chance - using no contraceptive method to prevent pregnancy is likely to result in pregnancy within the first month for 33 percent of those couples having sexual intercourse--within the second month there will be 25 percent more; the most reliable contraceptive is the one most likely to be used consistently.

3. Community resources are available to help with family planning and to provide health care.

(9:F:10) Describe common sexually transmitted diseases, their prevention and their control.

1. Syphilis - widespread communicable disease; high incidence in young adults; often goes untreated.

a. Cause - Treponema pallidum (a spirochete or corkscrew shaped bacterium).

(1) Thrives in the moist environment of mucous membranes lining the genital tract, rectum, and mouth; dies almost immediately outside the human body.

(2) Primarily contracted through sexual intercourse with an infected person but can be spread through kissing, during oral-genital sex, through a break in the skin, or through the placenta to the unborn child during pregnancy.

b. Symptoms - once inside the body it causes symptoms similar to those of many major diseases and it is often called "the great imitator"; symptoms appear in three stages and the disease can affect a pregnant woman's unborn child.

(1) Primary stage - 10 to 90 days after exposure.

(a) Chancre, or painless sore, appears at the site where the spirochete entered the body (penis, vagina, anus, mouth); may go undetected; highly infectious.

(b) Best diagnosed by darkfield microscopic examination; can be effectively treated with massive doses of long-acting penicillin; follow-up examination is important.

(c) Chancre disappears without treatment within about three weeks, but the disease remains in the body and travels through the bloodstream.

(2) Secondary stage - 6 to 8 weeks after the appearance of the chancre, but can occur up to one year later.

(a) Common symptoms lasting 2-6 weeks include: a generalized rash (which in some cases is limited to the palms and soles), fever, sore throat, headache, swollen glands, painful joints, white patches on the mucous membranes lining the mouth and throat, hair loss.

(b) The mucous membranes or moist lesions of this stage are highly infectious.

(c) The darkfield microscopic examination and specific blood tests for syphilis (VDRL and others) are used to diagnose the infection; antibiotics are effective treatment.

(d) Without treatment, symptoms disappear but the disease remains in the body; this latency period can last for a few months or up to 20 years; the early latency period is potentially infectious to sexual partners.

(3) Tertiary stage - permanent destruction of body tissue becomes evident; the disease is no longer thought to be infectious.

(a) There may be soft gummy tumors in almost any body tissue; blindness, insanity, heart disease, paralysis, and even death can occur.

(b) Little can be done to repair the destruction, but further damage can be prevented.

(c) Blood tests, physical examination, biopsy, x-rays are used to make a diagnosis; antibiotics are given for treatment.

(4) If syphilis is present during pregnancy, the fetus may be severely damaged or stillborn.

(a) A woman with syphilis can pass the disease to her unborn child for up to several years after she has contracted it herself.

(b) The spirochete can cross the placenta after the eighteenth week of pregnancy.

(c) Congenital syphilis is completely preventable if the mother is treated before the fifth month.

c. Immunity against syphilis does not exist; the infection can be contracted more than once, and it can exist with other diseases (like gonorrhea).

2. Gonorrhea - communicable disease most frequently reported by state health departments; high incidence in young adults; often goes undetected.

a. Cause - Neisseria gonorrhaeae (gonococcus bacterium).

(1) Thrives in the moisture of the mucous membranes of the genitals, rectum, and mouth.

(2) Transmitted almost entirely by sexual intercourse but also may be spread through oral-genital contact, kissing, and other intimate activities; it may be transmitted to an infant during childbirth.

b. Symptoms - the incubation period is usually 2 to 8 days but may be longer; many males and most females with gonorrhea do not have early symptoms.

(1) In males, 20 percent are symptomless, but organisms can be harbored in the prostate and found in the semen; 80 percent have a burning sensation during urination and a yellow discharge from the penis.

(a) Unless sufficiently treated, a wide range of complications can develop; the organism can get into the bloodstream and involve virtually any organ of the body; the most frequent complications are infection of the prostate, seminal vesicles, epididymides, testicles, bladder, kidneys.

(b) Permanent damage may include urinary obstruction, inflammation and abscess of the prostate, and sterility as a result of scar tissue formation.

(2) In females, 90 percent produce no painful symptoms so they are unaware of the infection in the early stages; the organism may be harbored in the vagina and unknowingly transmitted to others.

(a) The usual early complaint is irritation of the vagina with discharge and sometimes a burning sensation during urination.

(b) The infection often spreads to the uterus, fallopian tubes, ovaries, and into the abdominal cavity (pelvic inflammatory disease) causing fever, nausea, vomiting, lower abdominal pain.

(c) Gonorrhea causes scar tissue in the reproductive organs and is the leading cause of sterility in women.

(d) Sometimes the organism enters the bloodstream and affects other parts of the body; some possible complications are heart, lung, and liver disease, as well as arthritis.

(e) Untreated during pregnancy, the infection can spread to the infant as it passes through the birth canal (resulting in blindness).

(f) The Pill increases chances of contracting gonorrhea because the vagina is more alkaline than usual; contraceptive foams and jellies are acidic and antagonize the growth of the organism, but do not prevent infection.

c. Diagnosis of gonorrhea is most reliably made with a culture.

(1) Treatment of choice is penicillin, but some strains have grown resistant and other more expensive medications are used; follow-up care is essential.

(2) Immunity against gonorrhea is unlikely; it can be contracted more than once, and it can exist with other diseases.

3. Genital herpes - has spread rapidly in recent years.

a. Cause - Herpes Simplex Genitalis (HSV-2) is a virus which is generally spread by sexual contact and has an incubation period of 2 to 20 days.

b. Symptoms include painful blisters on the penis, inside the vagina, on the cervix, pubic area, thighs; sometimes found in the mouth and throat as a result of oral-genital sex; there may be swollen glands and symptoms of influenza.

c. First blisters persist for two to four weeks, and then disappear, but recur for one to two week periods throughout life during times of stress; these recurring episodes are not necessarily triggered by sexual intercourse; the disease is most communicable when sores are present.

d. Herpes is associated with cancer of the cervix, miscarriage, premature births; babies may be infected during delivery resulting in severe deformity or death, thus a Caesarean section is often performed in these circumstances.

e. Diagnosis is made by physical examination, microscopic examination, culture, and blood test.

f. There is no known cure, but treatment can relieve the symptoms (using soothing compresses and ointments, while avoiding heat and sexual contact, wearing cotton underclothing).

4. Moniliasis - caused by Candida albicans, a fungus.

a. Candida albicans is a normal inhabitant in the mouth, digestive tract, and vagina, but it is usually held in check; certain conditions seem to cause the fungus to grow out of control.

b. The role of sexual contact in spreading this disease is not known, but oral contraceptives, diabetes, pregnancy, poor nutrition, and antibiotics may trigger its growth; incubation period is unknown.

c. Symptoms are: cheesy, foul-smelling vaginal discharge and vaginal itching in females; inflammation of the glans, penis, urethritis, and pain during urination in males; infection of the mouth can occur (thrush); complications are rare.

d. Diagnosis is made by microscopic examination or culture of discharge, and local treatment or oral medications are frequently prescribed.

5. Trichomoniasis - caused by Trichomonas vaginalis, a protozoa.

a. It is generally spread by sexual contact, but may be passed on through contaminated objects (towels) used by an infected person; incubation varies from a few days to a month or more.

b. Females have itching, burning, and a profuse, foul-smelling vaginal discharge; some have no symptoms at all.

c. Male carriers usually have no symptoms, but some have inflammation of the prostate, seminal vesicles, or urethra with a slight discharge from the penis and pain during urination.

d. Although the infection can be spread from mother to baby, there are no known serious complications

in babies or adults; however, chronic infection has been associated with cancer of the cervix.

e. Diagnosis is made through microscopic examination or culture test, and oral medication is prescribed.

6. Genital warts (Condyloma acuminatum) - caused by a virus.

   a. They are thought to be generally sexually transmitted with an incubation period from a few weeks to several months.

   b. Symptoms include irritation, itching of characteristic pink and cauliflower-like warts on male or female genitals.

   c. There is little apparent danger to adults, but a baby can be infected at birth and develop growths on the larynx.

   d. Diagnosis is made by physical examination and treatment includes freezing, cauterization, chemical treatment or surgical removal; because they thrive in moisture, they are more difficult to cure when they are present in the vagina or rectum.

7. Lice (Pediculosis pubis or crab lice) and scabies (mites) are passed on by close body contact and through contaminated objects (linens and clothing).

   a. Lice multiply rapidly and cause intense itching around the pubic area; they withdraw blood and deposit nits (eggs) on pubic hair.

   b. Scabies also cause intensive itching around the genitals but often spread to the buttocks, hands, breasts, legs; these mites burrow under the skin making raised lines and causing intense itching; it takes about a month or two for the disease to become noticeable.

   c. Lice and scabies are more annoying than dangerous, but secondary infection can occur from scratching.

   d. Diagnosis is usually made by physical examination and treatment includes application to the body of a special soap, as well as hot washing and drying of clothing and linens.

8. Prevention and control of STDs are the responsibility of each individual.

   a. Avoiding exposure is the best prevention; other measures have limited effectiveness (washing, urinating, and use of condom).

   b. Anyone who thinks he/she has been exposed to a sexually transmitted disease should seek immediate medical treatment and notify contacts. (Self-treatment is not effective.)

   c. If you suspect you have contracted a sexually transmitted disease, immediately go to a physician or clinic for diagnosis and treatment. (Self-treatment is not effective.)

   d. If treatment for a sexually transmitted disease is necessary, instructions for taking medication and for follow-up examinations with the physician should be carried out; it may take more than a single series of treatments to completely eliminate the infection.

   e. Age, lack of money, embarrassment, concern for privacy should not interfere with seeking treatment; there are free clinics which provide services with these concerns in mind.

   f. If you are infected, tell your partner(s) or have a health representative contact him/her/them and do not engage in any sexual activity until treatment is completed.

GRADE 10

DRIVER EDUCATION

GRADE 11

(11:F:1) Recognize responsibilities in relation to sexual development.

1. Strong physical attraction to the opposite sex is natural and it occurs long before an individual is emotionally or financially prepared to accept the responsibilities of marriage and a family.

2. All relationships should be based on firm moral principles whether they involve parent/child, friend/friend, brother/sister, or boy/girl.

3. Sexual morality is no different from any other morality and includes honesty in the relationship, trust and confidence in yourself and in each other, and a conviction that the other person's welfare is as important as your own.

4. Sometimes people use their sexuality in ways that are harmful to themselves and others.

   a. Using sex to prove femininity or masculinity, or to prove independence of parents, is immature behavior.

   b. Using sex for personal gain--as a bribe, for punishment, for revenge, or as a reward--is a form of exploitation.

5. Responsible sexual development includes looking past the present to the future and considering the consequences of behavior to yourself and others, like the possibility of becoming pregnant or causing pregnancy, contracting or spreading a sexually transmitted disease, creating emotional problems for yourself or another person.

(11:F:2) Recognize that there are myths and misconceptions about human sexuality.

Some examples of myths and misconceptions are:

1. Men are strong, aggressive, brave, and have well-defined roles to play; women are weak, passive, dependent, and they too have specific roles to play.

2. The size of a woman's breasts or a man's penis is an indication of his/her ability to enjoy sex or to produce children.

3. You are not sexual until you start having sex.

   a. You can prove your femininity or masculinity through the sex act.

   b. You can prove how great you are by the number of sexual experiences you have.

4. You should feel ashamed about having a sexual body and sexual impulses; physical, sensual or sexual pleasure is wrong; the sole purpose of sexual intercourse is reproduction.

5. Having had a same-sex experience makes you a homosexual.

6. Having sexual fantasies or dreams is abnormal.

7. Masturbation causes insanity.

8. Women secretly want to be raped; those who are raped are at fault and actually enjoy the experience.

(11:F:3) Explain the structure and function of male and female reproductive systems. (Reinforcement of objective 9:F:5)

(11:F:4) Identify various ways of sexual expression.

1. There are many influences which affect how we express our sexuality, namely: parents, peers, media, religious attitudes and beliefs, personal needs and standards.

2. Sexual fantasy - imaginary participation in exciting sexual events; it is a way to explore sexual feelings and act out desires; most people have these fantasies and they do not usually interfere with real life relationships when they occur in moderation.

3. Masturbation - self stimulation of the genitals to achieve sexual pleasure which often leads to orgasm; it may happen during a fantasy; historically, it was claimed to cause physical and emotional harm - generally this has been found to be untrue, but some negative attitudes persist and these can lead to feelings of guilt.

4. Necking - showing affection with restraint; it includes kissing, hugging, and discriminate caressing.

5. Petting - touching or stroking another person's body, especially the breasts or genitals; it often leads to sexual intercourse.

6. Sexual intercourse - the insertion of the erect male penis into the female vagina; it may result in orgasm for one or both; in the male, orgasm is usually accompanied by ejaculation of semen.

7. Fornication - voluntary sexual intercourse on the part of an unmarried person.

8. Adultery - voluntary sexual intercourse between a married person and any other than the lawful spouse.

9. Oral genital sex - stimulation of a partner's genital organs with the mouth; some people consider it to be pleasurable while others see it as a perversion; although it cannot result in pregnancy, it can lead to sexually transmitted diseases located in the mouth and throat.

10. Homosexuality - sexual attraction to people of the same sex rather than the opposite sex; historically, it has occurred in almost every society; it is probably caused by a combination of factors; people can express affection for members of the same sex without being homosexual.

11. Bisexuality - sexual attraction to members of both sexes.

12. Transvestism - occurs when a person feels he or she has both a male personality and a female personality in the same body; this person may choose to wear clothing of the opposite sex some of the time.

13. Transsexualism - belief that a person is a member of the opposite sex trapped in the wrong body; some have sought medical treatment to change their physical sex characteristics.

14. Voyeurism - seeking and achieving sexual pleasure from watching other people who are undressed or who are engaged in sexual activity (peeping tom).

15. Exhibitionism - public exposure of the genitals; the person usually wants to shock someone.

16. Sadism - pleasure derived from inflicting physical or psychological pain on others.

17. Masochism - pleasure derived from physical and psychological pain inflicted on oneself by self or others.

18. Prostitution - the practice of having sexual relations with another person for money; the most common type is the female servicing male customers, but prostitutes can be members of either sex and they may participate in homosexual activity.

19. Pornography - refers to films, books, photographs, and other materials designed to excite people sexually.

20. Incest - sexual relations between individuals too closely related to be legally married (father/daughter, mother/son, brother/sister).

21. Rape - having sexual relations with a person against that person's will, usually by use of force; it can involve persons of the same sex; it is a violent crime and should always be reported to the police; medical treatment is advised.

22. Sodomy - any unnatural form of sexual intercourse (human and animal is one example).

23. Necrophilia - sexual intercourse with a dead person (a form of sodomy).

(11:F:5) Explain various methods of family planning.

1. Family planning means creating a family according to a purposeful design. (Review)

2. Abstinence - restraint in having intercourse; complete abstinence is the most effective method of contraception.

3. The pill - combines estrogen and progesterone; it suppresses ovulation by acting on the pituitary gland; if not taken as directed, ovulation and conception may occur.

   a. Advantages - easy to use; dissociated from the sex act; menstrual cycles are predictable.

   b. Disadvantages - side effects similar to symptoms of pregnancy; hazards include blood clot formation (smoking greatly increases risk); prescription required.

c. Effectiveness - 99 percent if taken as directed.

4. Mini-pill - contains progesterone; changes the mucus of the cervix and the lining of the uterus making unfavorable conditions for sperm cells.

   a. Advantages - fewer side effects than the pill.

   b. Disadvantages - bleeding irregularity and spotting; prescription required.

   c. Effectiveness 97 to 98 percent if taken as directed.

5. IUD (intrauterine device) - device inserted into the uterus which either interferes with fertilization or implantation of the ovum.

   a. Advantages - no interference with hormones; no need to remember to take it each day; may be removed when pregnancy is desired.

   b. Disadvantages - may be expelled unnoticed; perforation of the uterus sometimes occurs; may be spotting between menstrual periods and cramping during early months of use; requires physician's insertion.

   c. Effectiveness - 97 to 98 percent, but user must check for presence after each menstrual period.

6. Diaphragm - rubber device that fits over the cervix preventing sperm from entering the uterus; it should be used with a spermicide.

   a. Advantages - no side effects; may be inserted several hours before intercourse and is left in place at least 6 to 8 hours afterwards.

   b. Disadvantages - some women find insertion objectionable; requires washing with warm soapy water and careful storage; must be fitted by a physician.

   c. Effectiveness - 75 to 90 percent, depending upon whether spermicide is used.

7. Condom - thin stretchable rubber sheath to cover the penis; it prevents sperm from entering the vagina

when applied over the erect penis (leaving room for semen).

a. Advantages - no side effects; protective measure against sexually transmitted diseases; no prescription needed.

b. Disadvantages - some users feel it decreases sensation.

c. Effectiveness - 80 to 85 percent, but up to 97 percent if used carefully (sheath held in place as penis is withdrawn) and with spermicide.

8. Spermicide (foam, jelly, cream, or vaginal suppository) - kills sperm, decreases sperm motility; sperm cannot pass through chemical barrier.

a. Advantages - no systemic side effects; increases effectiveness of diaphragm and condom; easy to use; aids lubrication of the vagina; no prescription needed.

b. Disadvantages - thought to be messy by some users and may be irritating.

c. Effectiveness - about 70 to 80 percent when used without diaphragm or condom.

9. Rhythm - abstaining from intercourse during the fertile period; it can include taking body temperature to better predict the time of ovulation.

a. Advantages - physically safe because no drugs or appliances are used; meets requirements of some religions.

b. Disadvantages - requires high level of motivation, careful record keeping, willingness to abstain; fairly predictable menstrual cycle; ovulation may occur at unpredicted times.

c. Effectiveness - uncertain.

10. Withdrawal (coitus interruptus) - withdrawal of the penis from the vagina before the male ejaculates.

a. Advantages - can be used when no other method is available.

b. Disadvantages - difficulty recognizing imminent ejaculation; sperm cells may be present in pre-ejaculate; conception can occur if semen is deposited outside the vagina but near the vaginal opening.

c. Effectiveness - unreliable.

11. Douching - washing out the vagina after intercourse; is ineffective and may actually force ejaculate through the cervix.

12. Tubal sterilization - the fallopian tubes are sealed and cut to prevent ova and sperm cells from traveling through them and uniting; the procedure is not easily reversed.

13. Vasectomy - each vas deferens is cut and sealed after two small incisions are made in the scrotum; this prevents sperm from entering the semen; the procedure is not easily reversed.

(11:F:6) Describe common sexually transmitted diseases, their prevention and their control. (Reinforcement of objective 9:F:..0)

GRADE 12

(12:F:1) Describe the purpose and function of the family in today's society.

1. The family is the basic unit in the organization of society; it links the past with the future.

2. The family provides identity, security, and love for all of its members.

3. Family members share joys, sorrows, troubles, pains, successes, and failures; they help each other solve problems and satisfy personal needs.

4. Almost all learning and training of early childhood occurs within the context of the family, influencing behavior, attitudes, and personality of the individual.

5. The family perpetuates the human race and, although it assumes various compositions, it is the socially approved means for production and rearing of children.

(12:F:2) Identify the responsibilities involved in parenting.

1. Parenting is a job that requires commitment 24 hours a day, 7 days a week, 52 weeks a year, with no leaves or opportunity to change your mind; it is at times exhilarating, exhausting, exasperating.

2. Children need to feel loved, wanted, special, cared for, and have parents who like them for themselves.

3. Children need security, assurance that parents will be there when needed, a feeling of protection and belonging, a set of standards and values, models from which they can learn behavior, a sense of defined limits and controls, and a stimulating environment.

4. Children need food, clothing, shelter, medical and dental care, education, and an opportunity to reach their full potential as human beings.

5. Parenting involves active participation in meeting children's needs.

(12:F:3) Identify factors that affect the family.

1. In-laws, the elderly, children, and handicapped members all have their influence.

2. Parent employment status determines the amount and perhaps the quality of time spent with children; it is an economic factor.

3. Where the family lives, mobility of its members, attitudes, values, religion, entertainment and recreation interests, crime or alcohol/drug abuse involving parents or children are additional factors.

4. Divorce and death, resulting in single heads of households, affect the family in various ways.

(12:F:4) Recognize the importance of establishing an identity.

1. Values are acquired from family, friends, religion, school, the media; often they are conflicting and confusing.

2. We need to develop a system for selecting those values which best match our personal beliefs.

3. Basic values, such as trust, honesty, loyalty, tolerance, provide a stable structure for our lives; they help to establish who we are; they integrate our personality making it predictable, consistent, and whole.

4. Moral values help us to become persons of dignity, worth, and integrity.

5. We cannot love and value others, unless we love and value ourselves.

(12:F:5) Describe responsibilities in preparation for marriage.

1. It is important to understand expectations and responsibilities in marriage and parenthood.

   a. Roles and duties - how each sees the other person's role in marriage; what duties each will assume; how decisions will be made

   b. Religion - its importance; how beliefs differ - if different; how parental objections will be handled and how children will be raised

   c. Money - how much is needed; is that much available, if not, how can it be obtained; who will work and at what occupations; how will money be budgeted and who will handle the bookkeeping

   d. Friends and social life - which friends will be included; what things will be done; how much socializing will there be together/apart

   e. Relatives - how close to live to them; how often they will be seen; how to handle problems with them

   f. Children - whether to have any; how many; when; what form of family planning to use; what are feelings about adoption

g. Sexual behavior - what the relationship means; how to handle sexual problems; whether sexual behavior will be discussed with others

h. Life goals - what each thinks he/she wants to achieve; do goals conflict and what can be done about it; how each can be supportive of the other.

2. Premarital counseling provides the opportunity to explore problems and prospective uncertainties that could interfere with the anticipated marriage; as well as positive aspects of the marriage relationship; counselors include clergy, physicians, psychologists, lawyers, social workers.

3. A premarital physical for the couple includes examination of pelvic and genital organs and discussion of any findings which might indicate trouble for the individuals or the marriage; questions about sexual function, family planning, and contraception are usually raised.

4. The couple should plan the wedding and honeymoon so that stress-producing factors are minimized.

a. The wedding should fit the desires of the couple and not cause a heavy financial burden; elopement and secret marriage have a number of disadvantages.

b. The honeymoon should be relaxed, provide privacy, be at a place that both enjoy, not create a financial burden, and last long enough to allow for adjustment, yet not lead to boredom.

(12:F:6) Describe different adult relationships, adjustments and sources of conflict, and crises which may occur.

1. Marriage is the most acceptable way for a man and woman to share their lives in our society.

a. Marriage is a legal commitment, and for many, it is a spiritual bond which includes the promise to stay together and help each other through both good and bad times.

b. Marriage is a sexual relationship and couples pledge to remain faithful to each other.

c. It is an economic relationship which includes plans for earning, spending, and saving together.

d. It is a family relationship, even if there are no children; partners work together toward common goals without giving up their individual identities; if children are born, the couple accept responsibility for meeting the children's needs while continuing the husband and wife relationship.

e. It is the sharing of a home, other material things, a lifestyle, and not being completely independent.

2. Sometimes couples live together without marriage.

a. In some states, a long term arrangement of this kind is called a common law marriage and is recognized as valid.

b. Couples may want to live together in a trial marriage; some break their relationship after awhile; others later obtain a marriage license and have a legal marriage ceremony.

c. Couples living together without marriage may be young or old, divorced or widowed.

d. Some people who choose this lifestyle say there are certain advantages.

(1) They can determine before marrying if they are compatible.

(2) They can satisfy their desire for a sexual relationship without being legally bound.

(3) There are economic advantages.

(4) If the relationship does not survive, they can separate without the legal problems of divorce.

(5) No vows have been taken and some feel free to date outside the relationship.

e. Others say there are disadvantages.

(1) The possibility of pregnancy and an unwanted child exists.

(2) Parents of the couple often do not accept the lifestyle.

(3) Deep feelings can develop, similar to those in a marriage; however, without the commitment of marriage, some find it easier to break the relationship than to try and make it work.

(4) One person may be more attached in the relationship and be deeply hurt when the other wants to be free of it.

3. Single life is the choice of many people; some live alone because they are widowed or divorced and others are not ready for marriage; many live with another member of the same sex or with their families.

a. Advantages include independence and the freedom to pursue one's own life goals.

b. Some are pressured by family and friends to find a partner and get married.

c. Loneliness can be a problem for some singles, but many live fulfilling lives and contribute significantly to society.

4. Adjustments and sources of conflict in adult relationships require learning to give and take in a variety of areas and these include:

a. Social and cultural activities

b. Economic, intellectual, sexual, physical, religious matters

c. Equal sharing of responsibilities

d. Employment and living arrangements

e. Choices involving children, friends, relatives.

5. Crises which occur in adult relationships include:

   a. Illness/death of a mate, parent, or child

   b. Inability to have children

   c. Separation or divorce

   d. Positive changes which produce stress (vacations, holidays, promotions).

6. Circumstances growing out of crises and conflicts may result in the adoption or foster care of children.

(12:F:7) Identify factors to be considered in family planning.

1. Family planning is a partnership decision; both husband and wife should understand its purpose and the methods available; they should decide jointly which method is most appropriate in meeting their needs.

2. The couple should decide whether to have children, how many they want, and how they will be spaced; family planning means creating a family according to a purposeful design.

3. Factors to be considered in family planning are:

   a. Period of adjustment in early marriage - the husband and wife need time to know each other better before having a child; early pregnancy can interfere with things they want to do and places they want to go

   b. Financial security - need to further the education of the couple and the possibility of a child being an economic burden

   c. Career goals of couple - need to be understood in relation to their compatibility with parenthood

   d. Cultural heritage - affects the role expectations of the mother, father, grandparents and affects family behavior patterns

e. Health and age of the mother - unrestricted fertility can be dangerous to physical and emotional well-being in many cases

f. Genetic disorders or traits of either or both parents - may require genetic counseling; exposure to drugs and radiation need to be considered

g. Religion - penetrates every phase of life; especially when there is an interfaith marriage, decisions need to be made about the child's religion and observance of religious holidays

h. Educational goals desired for each child - what is the ability of the parents to make provisions for meeting these goals

i. Child rearing practices - which theories will be used (tolerant, relaxed, rigid) and how.

(12:F:8) Describe various methods of family planning. (Reinforcement of objectives 9:F:9 and 11:F:5)

(12:F:9) Explain birth process from fertilization through delivery including prenatal and postnatal care.

1. Fertilization (Refer to objective 9:F:7.)

2. Prenatal care

a. A physician should be consulted early in the pregnancy and throughout the pregnancy on a regular basis. (Refer to objective 9:F:8.)

b. The mother has the major responsibility for her prenatal care and this includes control of weight, diet, exercise, rest, and prevention of complications. (Refer to objective 9:F:8.)

c. Complications - warning signals to see a physician as soon as possible include: bleeding, sudden and excessive weight gain, swelling or puffiness of the face or hands, severe continuous headache, blurring of vision, flashes of light before the eyes, sharp or continuous abdominal pain, severe or continuous vomiting, chills, fever, or sudden release of fluid from the vagina.

(1) Ectopic pregnancy - tubal pregnancy is the most common type and causes severe abdominal pain sometimes followed by rupture of the tube.

(2) Miscarriage or spontaneous abortion - can sometimes be prevented if early warnings are heeded.

(3) Bladder and kidney infections - are common in pregnancy and can sometimes be prevented by drinking adequate fluids, especially water.

(4) Toxemia - is a serious and potentially dangerous disturbance in the mother's circulatory system; can usually be treated; untreated it can lead to convulsions and coma in the mother.

(5) RH factor - this blood incompatibility between the fetus (RH+) and the mother (RH-) occurs after the first pregnancy causing anemia in subsequent babies; anti-RH antibodies within 72 hours of delivery, miscarriage, or abortion can prevent having an RH problem in future pregnancies.

3. Delivery of the baby is part of the labor process.

a. There are three stages of labor. (Refer to objective 9:F:7.)

(1) Stage one begins with regular contractions of the uterus and ends when the cervix is fully dilated.

(2) Stage two begins after dilation of the cervix and ends with the delivery of the baby.

(3) Stage three begins after the birth of the baby and ends with the delivery of the placenta, umbilical cord, and membranes.

b. Labor and delivery practices - the emphasis is on natural or prepared childbirth with full participation of both parents; may be attended by a midwife, nurse practitioner, obstetrician; may take place in a hospital, birthing center, or at home.

(1) Lamaze method - includes prelearned, controlled breathing techniques with active participation in the labor process; Lamaze-trained women have fewer complications during childbirth and require less medication than others.

(2) LeBoyer method - focuses on the infant; intended to reduce the trauma of birth by having the newborn emerge in a quiet, softly lit room, is then massaged and lain on the mother's abdomen; the cord is cut after pulsating stops; the baby is bathed in warm water and then rocked and caressed.

(3) Cesarean section - is the removal of the infant through a surgical incision in the abdominal wall and uterus; the rate has dramatically increased during the last several years; it is often done in instances of prolonged labor, fetal distress, active genital herpes infection of the mother, poor position or large size of the baby.

4. Postnatal care

a. Consultation with physician(s) should be arranged for the benefit of both mother and infant.

b. Bonding - a special attachment develops between a mother and her infant during the sensitive period following delivery; it is important to later development of the child that close contact with the mother occur.

c. Breast feeding - promotes bonding; is satisfying and healthful for the mother; protects the infant against disease and allergy; some women are unable or do not want to breast feed; providing love and security to the infant is most significant whether or not breast feeding is chosen.

d. The mother undergoes many changes during the postnatal period.

(1) Women lose about 10 pounds at the time of birth and 4 to 15 pounds in the following weeks.

(2) It requires 4 to 8 weeks for the reproductive organs to return to normal, and breast feeding hastens this process; for 3 to 6 weeks, there is a vaginal discharge which changes from bright red to brownish or pink, and eventually is yellow or white in color.

(3) Exercises are helpful in restoring the abdomen to its original size, shape, and tone.

(4) Menstruation returns in about 4 to 10 weeks if the baby is not breast fed; breast feeding delays menstruation because prolactin (hormone involved in milk production) suppresses the hormones needed for ovulation; pregnancy does sometimes occur during the breast feeding period, however.

(5) Postpartum depression is usually associated with fatigue, anxiety and fluctuating moods; it is temporary for most women but, when combined with fatigue and new demands, it can persist for several months.

(12:F:10) Recognize that there are methods of terminating pregnancy.

1. Morning-after-pill - contains estrogens and alters the uterine lining, thereby interfering with the implantation of the fertilized egg; it is controversial and not recommended for use except in cases of rape, incest, or complicated high-risk pregnancy.

2. Induced abortion is the deliberate removal of the embryo or fetus from the uterus before it can survive by itself; because of the psychological effects of abortion, counseling is important before and after the procedure.

   a. D & C (dilatation and curettage) a procedure in which the cervical opening is progressively dilated (stretched), the lining of the uterus scraped with a curet (surgical instrument shaped like a spoon) and the contents removed; the oldest abortion method.

b. Suction method - the cervix is progressively dilated until it will admit a suction tip, and the uterine contents are removed under low pressure by a vacuum system; a curet is sometimes used to check for complete evacuation; safer than a regular D & C with less likelihood of perforating the uterus and less blood loss; must be done early in the pregnancy.

c. Saline abortion - a needle is inserted into the amniotic sac, fluid is removed and a salt solution is injected causing the fetus to die and the woman to go into labor.

   (1) Serious complications are associated with this procedure.

   (2) Saline solutions have largely been replaced with other substances which cause fewer complications.

   (3) This procedure is likely to be resorted to in late pregnancy only.

d. Hysterotomy - similar to a Cesarean section, it involves removal of the fetus and amniotic sac through an incision into the abdomen and uterus; used in late pregnancy.

e. Complications greatly increase if an abortion is performed after the eighth week of pregnancy; abortions between the fourteenth and twentieth week are considered very risky; late pregnancy abortions are extremely dangerous and rarely performed.

f. Induced abortion is not a contraceptive but an alternative to continuing a pregnancy which threatens the health of the mother or to prevent the delivery of an unwanted child.

g. Induced abortion is legal in the United States when it is performed by a qualified physician, in a medically approved situation; any surgical procedure carries some risk; legal abortions run a low risk of complications (less than 5%); illegal abortions performed by unskilled persons and/or in an unsterile environment carry a much higher risk of complications; complications which may result

are permanent damage to the reproductive organs, serious bleeding, infection, and even death.

h. Induced abortion is a highly controversial issue and an unacceptable alternative to many men and women.

(12:F:11) Recognize the consequences of teenage pregnancy.

1. Physically, the teenager's body may not be well enough developed to deal with the new demands placed upon it; teens are more likely than women in their twenties to die or suffer illness/injury as the result of pregnancy.

2. The baby's health is threatened - teens and women over 35 are more likely than others to have defective and/or premature babies.

3. Abortion is not an easy choice and often results in fear, guilt and depression. (Counseling and medical advice and attention are important.)

4. Giving up the baby for adoption is not an easy choice and separation of the mother from the baby is often difficult for the mother. (Community resources are available to help with an unplanned pregnancy and adoption arrangements.)

5. An early marriage is more likely to break up than one between older people; young couples face the difficulties of any marriage plus many others.

   a. Pregnancy does not provide a foundation for a lasting marriage; partners may feel trapped and are more likely to separate and divorce than are other partners.

   b. The couple may be too emotionally immature to handle the responsibilities of marriage; lack of education and skills can result in especially difficult money problems.

6. Single motherhood involves the same responsibilities of married parenthood and the additional burdens of a single parent family.

   a. Society generally disapproves of pregnancy outside of marriage.

b. Parents of the mother may be embarrassed, feel socially disgraced, may not accept the child.

c. Living away from home presents financial problems (poor housing, inadequate diet and medical care) and often results in loneliness.

(12:F:12) Explain complications resulting from common sexually transmitted diseases. (Refer to objective 9:F:10.)

1. Syphilis is potentially destructive to any of the major body organs causing insanity, paralysis, heart and blood vessel disease, death; fetal damage can include facial deformities, deafness, death.

2. Gonorrhea is responsible for pelvic inflammatory disease, urinary and reproductive system blockage, sterility, arthritis; fetal complications include infection of the genitals and eyes (sometimes resulting in blindness).

3. Genital herpes is related to cancer of the cervix, miscarriage, premature birth; infection of the newborn can result in deformity or death.

(12:F:13) Recognize that human sexuality persists from birth to death.

1. We are born sexual beings, male or female.

2. Sexuality is a healthy aspect of our total personality and includes our bodies, how they function, our appearance, beliefs, behavior, strengths, and limitations.

3. Sexuality involves all of our life experiences; it changes in dimension as we progress through the life cycle.